



Franchise application

Please fill out all areas thoroughly.

Personal Information

Full Legal Name: _____

Cell Phone: _____ Alt Phone: _____

Email Address: _____

Marital Status: Single Married Divorced

Do you live in a Community Property State?
(AZ, CA, ID, LA, NV, NM, TX, WA, WI) yes no

Current Street Address: _____

City: _____ State: _____ Zip: _____

Do you rent or own this property? rent own

Have you lived at this residence for at least 1 year? yes no

Spouse's Full Legal Name: _____

Spouse's E-Mail: _____

Is your spouse employed? yes no

Type of work: _____

Would he/she work in your AirTime Trampoline Park? yes no

If yes, how often? Full time Part time

How do you intend to finance the acquisition or development of your new AirTime Trampoline & Game Park?

How much cash do you currently have available to invest in an AirTime Trampoline & Game Park? _____

Have you ever been a franchisee of another company? yes no
If yes, when and what company?

Why do you want to be a franchise Owner/Operator of an AirTime Trampoline & Game Park?

Are you willing and able to attend management training for two to four weeks in Michigan prior to your Park opening? yes no

Please list where you would like a location in order of preference.

1. _____
2. _____
3. _____

Will you be managing the operation of your AirTime Trampoline Park by yourself? yes no

If no, who will manage and operate it for or with you?

Education

What is the highest level of education you have completed?

- High School/GED Some College 2 Year (Associates)
4 Year Degree Post Grad

Please list your current employer information:

Employer Name: _____

Contact Info: _____

From: _____ to: _____

Position Title and Responsibilities:

If applicable, please list your spouse's current employer information:

Employer Name: _____

Contact Info: _____

From: _____ to: _____

Position Title and Responsibilities:

Real Estate: schedule 1

In the spaces provided below, please use the following abbreviations:

- A** Applicant
- S** Spouse
- J** Jointly with Spouse
- O** Jointly with someone other than Spouse
- ASP** Applicant's Separate Property
- SSP** Spouse's Separate Property

How Held	Property Type & Address	(A) Current Market Value	(B) Mortgage Amount	(A-B) = Equity
Explanation of Other:				

Financial Information

Note: List all amounts in whole dollars. Include total liability amounts, not just monthly payment amounts. If needed, attach additional worksheets.

Assets	Amount
Personal Cash -Checking/Savings	
Business Cash - Checking/Savings	
Stocks/Bonds	
401K/IRA/Keogh/Pension	
Real Estate (see schedule 1)	
Other Assets (please explain below)	
Total:	

Liabilities	Amount
Other Liabilities (please explain)	
Credit	
Bank Loans	
Auto Loans	
Real Estate (see schedule 1)	
Loan on Life Insurance	
Total:	

Net Worth [total assets – total liabilities]	Amount
Total:	

Financial Information

Note: List all amounts in whole dollars. Include total liability amounts, not just monthly payment amounts. If needed, attach additional worksheets.

Annual income	Amount
Applicant	
Spouse	
Dividends and Bonds	
Interest	
Alimony, child support or separate maintenance income (need not be revealed if you do not wish to have it considered as a basis for repaying this obligation)	
Other—Real Estate Income Properties	
Total:	

Annual expenditures	Amount
Property Tax/Insurance	
Income and Other Taxes	
Mortgage	
Other contract Payments (Auto Loans)	
Rent	
Insurance	
Alimony, Child Support/Maintenance	
Living Expense	
Total:	

Financial Overview Questions

Are any assets pledged or debts secured except as shown? yes no

Have you ever had a re-possession? yes no

Have you ever declared bankruptcy or had a judgement rendered against you? yes no

Have you ever been a guarantor of a firm that declared bankruptcy? yes no

Have you ever had a foreclosure, deed in lieu, or short sale on property you have owned? yes no

Are you party to any claim or suits? yes no

Have you been the subject of an IRS audit within the past 3 years? yes no

Have you ever been convicted of, plead guilty or nolo contendere to a crime (other than a traffic violation) in a court of law, a military court, or been refused a bond? yes no

Have you or a business entity you owned, controlled or where you were an executive officer, ever been involved in any civil litigation, arbitration or administrative proceeding as a party, or been the subject of any foreclosure, short sale, deed in lieu, bankruptcy, reorganization or similar proceeding affecting the rights of creditors? yes no

If yes to any of the above, please outline the circumstances, date, and current status.

Are you current with all taxes? yes no **(If no, please explain)**

Applicant

As endorser, co-maker or guarantor on any loans? \$ _____

Any legal claims against you pending? yes no

Past due taxes? yes no

Other special debt? yes no

Are you currently a defendant in legal action? yes no

Co-applicant

As endorser, co-maker or guarantor on any loans? \$ _____

Any legal claims against you pending? yes no

Past due taxes? yes no

Other special debt? yes no

Are you currently a defendant in legal action? yes no

Each of the undersigned has carefully read and submits the foregoing information provided in this statement to AirTime International Franchise, LLC. voluntarily as part of a franchise application. The information presented is a true, accurate and complete statement of my/our financial condition on the date indicated below. I understand that the information provided by me/us will be relied on by AirTime International Franchise, LLC. I agree to update this information while my franchise application is pending and until your AirTime franchise agreement is fully executed by sending a revised statement to AirTime as soon as the information changes.

Applicant Signature: _____

Date: _____

Co-applicant Signature: _____

Date: _____

Consent for background and reference checks

The purpose of this form is to notify you that because you have initiated a Franchise Application with AirTime International Franchise, LLC. ("AirTime") to pursue an AirTime Trampoline & Game Park franchise, AirTime may communicate with sources it selects to obtain and evaluate reports about you involving background; consumer and business credit; civil actions; bankruptcy; alcoholic beverage licensing; employment verification and history; workers' compensation history; criminal record including arrest, conviction, probation, parole and sentencing; driver's license and driving record; and personal references (collectively, "background reports") as AirTime deems necessary to consider my Franchise Application. I am providing this information voluntarily.

I, _____ with my signature below Hereby consent and authorize AirTime International Franchise, LLC., to access my background information reports. Additionally, I authorize AirTime International Franchise, LLC. to obtain any other reports pertinent to my proposed and on-going business relationship with AirTime International Franchise, LLC. This release shall remain in effect from the date hereof for the length of my business relationship with AirTime International Franchise, LLC. until I have satisfied all of my obligations to AirTime. I understand that I have the right to obtain a free copy of any consumer credit report(s) if: (1) Any adverse action/decision is made based on the information in the report(s), (2) if the request is made in writing within 60 days of the adverse action.

I, _____ understand that should my consumer report have a possible adverse effect on my business relationship with AirTime International Franchise, LLC. that I will be provided prior to taking any adverse action against me. If adverse action is taken, I will be provided a notice of the adverse action; the name, address and telephone number of the consumer reporting agency that furnished the report along with a statement that the consumer reporting agency did not make the decision to take adverse action and is unable to provide me with the specific reasons why the adverse action was taken; notice of the consumer's right to obtain a free copy of the consumer report from the consumer reporting agency and to dispute the accuracy of completeness of the information in the report. I understand that a consumer report may include, but is not limited to, information bearing on credit worthiness, credit standing, credit capacity, criminal background, character, general reputation, personal characteristics, and/or mode of living.

I, _____ state that I have read and understand this disclosure and hereby authorize AirTime to procure a consumer report. I further understand that my social security number and date of birth are being requested below solely for the purpose of generating an accurate consumer report.

By your signature and transmission by electronic means, you execute and submit this Franchise Application record intending to be legally bound, and you certify the information you provided is true, complete and correct, with the same force and effect as if you manually signed and submitted the Franchise Application to us. If required, or at our request, you agree to provide to us this Franchise Application in hard copy form.

AirTime will contact you following the receipt of your application to obtain your date of birth and social security number. Please DO NOT provide such information on this application.

Applicant Signature: _____

Date: _____

Co-applicant Signature: _____

Date: _____

Authorization signature page

Your Understandings and Authorization

I understand that any information not available to the public that I have received from AirTime International Franchise, LLC. (AirTime) or from any AirTime officer, affiliate, employee or contractor is highly confidential, has been developed with a great deal of effort and expense to AirTime and its affiliates, and is being made available to me as a result of this application. I will maintain this information in the strictest confidence.

I understand that AirTime does not control or direct, and is not responsible for the veracity, accuracy or completeness of any oral or written information I may learn or obtain from any franchisee of AirTime whom I may contact about AirTime franchises or the franchisee's AirTime International Franchise, LLC.

My signature below authorizes and directs any bank, lender, trustee, broker dealer, issuer, creditor, vendor, insurance company, consumer reporting agency or financial institution to release to representatives of AirTime any and all information concerning my accounts, assets, liabilities, obligations, and financial transactions. I further authorize the release to AirTime of any information requested regarding my character, account and credit history, credit scores, current standing and employment. This authorization shall be valid for information for one year after the date set forth below. I recognize that I have initiated a business transaction with AirTime.

Applicant Signature: _____

Printed Name: _____

Date: _____

Co-Applicant Signature (Spouse): _____

Printed Name: _____

Date: _____