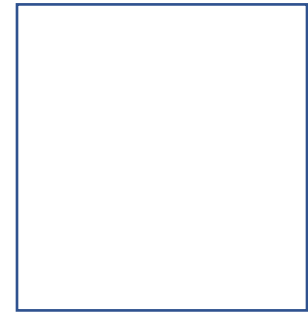


“Annexure A”



Passport Photograph

FRANCHISE FORM FOR YOGJEEVAN YOGA STUDIO

Organization Name / Individual Name	
State	
Residence Address 1	
Residence Address	
Contact Details (Phone Number & email id)	
Location (Where you want to start the studio)	
Space Available for yoga studio (in sq. ft)	
Why you want to start YOGA Studio? You can write on separate sheet as well.	
Your Current Profession	
Any prior experience in the category	
Any other yoga studio operational in your area?	

How much you expect to earn from this venture?	
Define Socio Economic Class around the area you shortlisted to start this venture	a) Income level b) Education Level c) Capacity of paying for yoga classes d) Independent house/ it is a flat system e) Are people health conscious around area?
Have you zero down the location/ space?	

Thank you

Name _____

Signature _____

Email id _____

Mobile No _____

