

CANADIAN KIDS NURSERY FRANCHISE APPLICATION FORM 2026

Thank you for your interest in becoming a Canadian Kids Nursery franchise partner.
Please complete all sections of this application. Submission of this application
does not constitute an offer or guarantee of a franchise.

1 APPLICANT INFORMATION

Full Name: _____
Date of Birth: _____
Nationality: _____
Passport/ID Number: _____
Residential Address: _____

City: _____
Country: _____
Postal Code: _____
Mobile Number: _____
Email Address: _____
LinkedIn Profile (Optional): _____



2 BUSINESS ENTITY INFORMATION (If Applicable)

Company Name: _____
Registration Number: _____
Year Established: _____
Business Address: _____

Website: _____
Current Business Activities: _____



3 FRANCHISE INTEREST

Preferred Country: _____
Preferred City/Area: _____

Do you already have a location?

☐ Yes ☐ No

If Yes, please provide details: _____

Preferred Franchise Type

- ☐ Single Unit
☐ Multi-Unit
☐ Area Development
☐ Master Franchise



4 EDUCATION & PROFESSIONAL BACKGROUND

Highest Qualification:

- ☐ High School
☐ Diploma
☐ Bachelor's Degree
☐ Master's Degree
☐ Other: _____

Current Occupation: _____

Years of Business Experience:

- ☐ 0-2 Years ☐ 3-5 Years
☐ 6-10 Years ☐ 10+ Years

Have you owned or managed a business before? ☐ Yes ☐ No

If Yes, please describe: _____



5 FINANCIAL INFORMATION

Estimated Net Worth (USD)

- ☐ Under \$250,000
☐ \$250,000 - \$500,000
☐ \$500,001 - \$1,000,000
☐ Over \$1,000,000



Available Liquid Capital (USD)

- ☐ Under \$100,000
☐ \$100,000 - \$250,000
☐ \$250,001 - \$500,000
☐ \$500,001 - \$1,000,000
☐ Over \$1,000,000



Estimated Total Investment Budget (USD)

- ☐ \$150,000 - \$250,000
☐ \$250,001 - \$350,000
☐ \$350,001 - \$500,000
☐ Over \$500,000



Source of Investment Funds

- ☐ Personal Savings
☐ Business Income
☐ Bank Financing
☐ Investors/Partners
☐ Other: _____



Have you been pre-approved for financing? ☐ Yes ☐ No

If yes, please specify the lender: _____



FRANCHISE FEE (Office Use Only)

Initial Franchise Fee: **AED 50,000**

ESTIMATED TOTAL INITIAL INVESTMENT

AED 1,000,000 (subject to location, facility size, licensing requirements, and local construction costs).



6 INTEREST IN CANADIAN KIDS NURSERY

Why are you interested in owning a Canadian Kids Nursery franchise?

What strengths will you bring to the franchise?



7 OPERATIONS

Will you be actively involved in the day-to-day operations? ☐ Yes ☐ No

If No, who will manage the business? _____

How soon are you prepared to open your franchise?

- ☐ Immediately
☐ Within 3 Months
☐ Within 6 Months
☐ Within 12 Months



8 REFERENCES

Reference 1

Name: _____

Relationship: _____

Phone: _____

Email: _____

Reference 2

Name: _____

Relationship: _____

Phone: _____

Email: _____



9 ADDITIONAL INFORMATION

Please provide any additional information that may support your application.



10 DECLARATION

I declare that the information provided in this application is true, complete, and accurate to the best of my knowledge. I understand that submitting this application does not guarantee the award of a Canadian Kids Nursery franchise. I authorize Canadian Kids Nursery to verify the information provided and conduct appropriate background and financial checks where permitted by applicable law.

Applicant Name: _____

Signature: _____

Date: _____



OFFICE USE ONLY

Application Received By: _____

Date Received: _____

Application Number: _____

Interview Date: _____

Status: ☐ Pending ☐ Under Review
☐ Approved ☐ Declined

Reviewer Comments: _____

Authorized Signature: _____ Date: _____

