

# Franchise Disclosure Agreement Form

## Franchisor Information

### Franchisor Name

### Franchisor Address

### Contact Person

## Prospective Franchisee Information

### Full Name

### Address

### Phone Number

### Email Address

## Acknowledgement of Receipt of Disclosure

### Date of Disclosure Document Provided

### Acknowledgement

I acknowledge that I have received the Franchise Disclosure Document from the franchisor listed above. I understand that I have at least the minimum period required by law to review the document before signing any franchise agreement or making any payment.



Franchisee Signature

Signature

Date

Franchisor Representative Signature

Signature

Date