



WELCOME . . .
 to the COCK of the WALK
 Restaurant Franchise
 Headquarters Website!



Franchise Information Form

Please complete the following Franchise Information Form by just typing the information needed in the spaces below.

You do not need to download this form to your computer to complete – but can complete it on-line from this screen.

Once completed, just click the SUBMIT button at the bottom of the page to send your information request.

Thank you for your interest in a Cock of the Walk franchise!

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

E-mail: _____

Phone: Work: _____ Home: _____

Cell: _____

Employer: _____

Are you interested in a FULL SERVICE _____ or EXPRESS Unit?

Location/area you are interested in: _____

Any additional comments: _____

To send this form via e-mail, just click the SUBMIT button below.