

Please answer as many of the following questions as possible. The more information you provide, the better we can serve you. The information you provide is protected by our [privacy policy](#).

CONTACT INFORMATION

First Name	<input type="text"/>	Last Name	<input type="text"/>
Telephone	<input type="text"/> <input type="text"/> <input type="text"/> Extn <input type="text"/>	Email Address	<input type="text"/>
Address	<input type="text"/>		
Province	<input type="text"/>	Postal Code	<input type="text"/>
Contact Preference	<input type="text"/>	Best Time to contact	<input type="text"/>

COMPANY INFORMATION

Company Name	<input type="text"/>																										
Website	<input type="text"/>	Industry	<input type="text"/>																								
Business Description <small>(Please supply enough information so that we can have the most suitable Consultant respond to your inquiry)</small>	<input type="text"/>																										
Current Stage of Development <small>(Select all that apply)</small>	<table border="0"> <tr> <td><input type="checkbox"/></td> <td>Core idea/business model formed</td> <td><input type="checkbox"/></td> <td>Business/Corp. registered</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Core Management Team assembled</td> <td><input type="checkbox"/></td> <td>Business Operations started</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Signed Partnership/ Franchise Agree</td> <td><input type="checkbox"/></td> <td>Product under development</td> </tr> <tr> <td><input type="checkbox"/></td> <td>New Start-Up Business</td> <td><input type="checkbox"/></td> <td>Existing business expansion</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Currently generating revenues</td> <td><input type="checkbox"/></td> <td>Existing Co. / new products</td> </tr> <tr> <td><input type="checkbox"/></td> <td>New Business Acquisition</td> <td><input type="checkbox"/></td> <td>Restructuring/ Transformation</td> </tr> </table>			<input type="checkbox"/>	Core idea/business model formed	<input type="checkbox"/>	Business/Corp. registered	<input type="checkbox"/>	Core Management Team assembled	<input type="checkbox"/>	Business Operations started	<input type="checkbox"/>	Signed Partnership/ Franchise Agree	<input type="checkbox"/>	Product under development	<input type="checkbox"/>	New Start-Up Business	<input type="checkbox"/>	Existing business expansion	<input type="checkbox"/>	Currently generating revenues	<input type="checkbox"/>	Existing Co. / new products	<input type="checkbox"/>	New Business Acquisition	<input type="checkbox"/>	Restructuring/ Transformation
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PROJECT INFORMATION

Amount of Capital being requested (CAD \$)	<input type="text"/>																								
Services Required <small>(Select all that apply)</small>	<table border="0"> <tr> <td><input type="checkbox"/></td> <td>Start-Up Mentoring</td> <td><input type="checkbox"/></td> <td>Business Plan</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Company Incorporation</td> <td><input type="checkbox"/></td> <td>Business Plan Review</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Small Business Advice</td> <td><input type="checkbox"/></td> <td>Detailed Financial Projections</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Strategic Planning</td> <td><input type="checkbox"/></td> <td>Business Financing</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Marketing Plan</td> <td><input type="checkbox"/></td> <td>Turn around Consulting</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Market Research & Analysis</td> <td><input type="checkbox"/></td> <td>Others (Please specify)</td> </tr> </table>	<input type="checkbox"/>	Start-Up Mentoring	<input type="checkbox"/>	Business Plan	<input type="checkbox"/>	Company Incorporation	<input type="checkbox"/>	Business Plan Review	<input type="checkbox"/>	Small Business Advice	<input type="checkbox"/>	Detailed Financial Projections	<input type="checkbox"/>	Strategic Planning	<input type="checkbox"/>	Business Financing	<input type="checkbox"/>	Marketing Plan	<input type="checkbox"/>	Turn around Consulting	<input type="checkbox"/>	Market Research & Analysis	<input type="checkbox"/>	Others (Please specify)
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<input type="checkbox"/>	Market Research & Analysis	<input type="checkbox"/>	Others (Please specify)																						
Any other additional information that may be helpful	<input type="text"/>																								

OPTIONAL QUESTIONS

How did you discover us?	<input type="text"/>
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Fax: 647-699-9891

We will do our best to respond to your inquiry within two business days.