**Member Applicant:**

Please type your information on this form, which will underscore most of your responses.

Upon completing, please email it to info@westcentralangelfund.com, or mail it to us.

**West Central Angel Fund I, LLC**

**Member Application**

Your Name (required):

Your Email (required):

State Residency (required):

Date (required):

Are you qualified as an Accredited Investor based on SEC requirements? (required)

□ Yes □ No

Briefly describe your investment and business experience (required):

Other Comments (optional):

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Thank you for submitting your WCAF I Member Application.**

An Executive or Investment Committee Officer will follow up with you.

**West Central Angel Fund I, LLC**

302 5th Street SW, Willmar, MN 56201

info@westcentralangelfund.com

[www.westcentralangelfund.com](http://www.westcentralangelfund.com)

(320) 214-5293