

LSAN Due Diligence Workshop – March 10, 2009 (11:00 - 4:00)
Barkers Island Inn & Conference Center
300 Marina Drive, Superior, WI 54880

Name:

Title:

Company:

Address:

City: _____ State: _____ Zip: _____

Phone: _____

Fax: _____

Email: _____

**Registration is open only to accredited investors. \$250 per person, FREE for
LSAN members. Check or credit card accepted**

Please mail completed registration form to:

Lake Superior Angel Network

455 Science Drive, Suite 240

Madison, WI 53711

<or> Fax to (608) 231-6877

Registration can also be made on-line at www.wisconsinangelnetwork.com/events.

Please charge my credit card the amount of: \$ ____ x registrants ____ = \$ ____.
____ Master Card ____ VISA

Account Number: _____ Exp: ____/____ CSV ____

Address (For credit card, if different than above):

City: _____ State: _____ Zip: _____

Signed: _____