

Western Massachusetts Venture Forum

Where Ideas Meet Money™

BUSINESS PLAN SUBMISSION FORM

BUSINESS PLAN NAME: _____

PLAN SPONSOR NAME: _____

CONTACT PERSON NAME: _____

CONTACT PERSON TITLE: _____

PHYSICAL ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

TEL #: (_____) _____ • **FAX #:** (_____) _____

E-MAIL ADDRESS: _____ @ _____

WEBSITE: _____

AMOUNT I AM LOOKING FOR: \$ _____ **DEBT** _____ **EQUITY** _____ **BOTH** _____

I understand and agree that:

- 1 There is NOTHING CONFIDENTIAL OR SECRET in any of the material I submit. You are not liable for the fact that information in my plan will become public.
- 2 You do not promise any results from my submission. All you promise is that a group will look at my plan for possible presentation at a Forum Session and that you MAY offer to forward my plan to venture capital sources. If the Review Committee feels that the Plan requires further work, you will provide me with sources who can help me complete the Plan.
- 3 Any negotiations I may have with anyone about any investment are not sponsored by you and are between me and interested investors individually.

DATE: _____

AGREED: _____

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