

# ANGEL INVESTOR CRITERIA

Please complete this form and return it to Northern Ontario Angels (NOA). This form provides NOA with the information needed to ensure that appropriate companies can be brought to your attention.

The information given is confidential to NOA and will not be released to third parties without your consent.

## Contact Details

Name :	
Company :	
Position :	
Address :	
Phone :	
Cell :	
Fax :	
Email :	
Website :	

## Investor Details

Please indicate your current affiliation by ticking the appropriate box.

Private Investor

Corporate Investor

Other (Provide Details)

Please indicate the amount you would consider investing in any one company.

\$10,000 - \$25,000

\$25,000 - \$50,000

\$50,000 - \$100,000

Over \$100,000

Please indicate the total amount you are seeking to invest per year.

\$25,000 - \$50,000

\$50,000 - \$100,000

Over \$100,000

**NOA** NORTHERN ONTARIO  
ANGELS  

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**ANO** LES ANGES DU  
NORD DE L'ONTARIO

Phone 1 (807) 344-4440

Phone 1 (888) 696-0808

Fax 1 (807) 344-8592

Email [noa@tbaytel.net](mailto:noa@tbaytel.net)

**Collaboration with Other Investors**

Please indicate whether you have previously invested in companies as an angel investor.  Yes  No  If yes, how many? \_\_\_\_\_

**Business Stage Interest**

Please indicate the business stages that are of interest to you.  Seed  Start-up  Growth  Established  Expansion  Mature

**Opportunities of Interest**

Please describe the opportunity and business or market sectors that would be of particular interest to you. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please indicate the types of business or industry categories that are of no interest to you. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Interaction with Companies in Which You Invest**

Are you interested in active involvement with companies in which you invest?  Yes  No

If yes, please indicate areas of expertise that you would be able to contribute. Please tick all that apply.  Marketing  Production  Finance  Legal  Technical  General Management  Other

Please indicate the type of management involvement you would like to have with a company in which you invest.  Non-executive  Part time executive  Full time executive  No direct involvement



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Any additional information you  
would like us to know

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Please note that unless otherwise stated NOA will send you information regarding client proposals via email.

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