

**SHOOTER'S COMMITTEE ON POLITICAL EDUCATION (SCOPE, INC)**

Fill in and Print or Print and fill in. Mail to PO Box 602 Tonawanda, NY 14151-0602

**Business Membership Application**

Date of Application \_\_\_\_\_ Donation, Annual \$50 \_\_\_\_\_ Annual Sponsor \$250 \_\_\_\_\_

Business Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Fax \_\_\_\_\_

Mailing address if different \_\_\_\_\_

Contact Name & Title \_\_\_\_\_

Secondary Contact \_\_\_\_\_

Website \_\_\_\_\_ Email \_\_\_\_\_

Type of business (gun shop, sporting goods, etc.) \_\_\_\_\_

(Donations to SCOPE are not refundable or tax deductible)