



*Please reply by
September 20, 2013*

_____ Yes _____ Number Attending

_____ No. Unable To Attend,

But Would Like To Donate:

\$_____ For An Educator To Attend In My Place

\$_____ To Support SCOPE Outreach

Name: _____

Credit Card# _____

Exp. Date ____/____/____ Sec. Code _____

Please make check payable to SCOPE

Ad Book-Recognition Opportunities

Cost of Ad:

Business Card 3 1/2x2- \$25.00

1/4 page 4 1/4 x 2 3/4 - \$50.00

1/2 page 4 1/4 x 5 1/2 - \$75.00

Full page 5 1/2 x 8 1/2 - \$100.00

\$_____

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