# Take The Lead 2027 Membership Form

**Classification**

**(Please Select One)**

**□ Individual, $30**

**□ Family (2 individuals living together), $50**

**□Gold, $2,500**

**□Platinum, $7,500**

**□ Lifetime, $750**

**□ Silver, $1,000**

**□ Diamond, $5,000**

**□ Junior (Free)**

**□ New Member □Renewal**

***Please Print Clearly***

**Date: _____**

**Title: _____**

**Address: _____**

**City: _____ State: _____ ZIP: _____**

**Business Phone: _____ Home Phone: _____**

**Email Address: _____**

***Payment Options***

**□ Check (Made payable to Take the Lead)**

**□ To pay by credit card please visit takethelead.org**

**Please mail the completed form to: Take the Lead, PO Box 148, Clayton, NY 13624-0148**

**1-800-814-1123**

**Take The Lead is a not for profit organization as designated under Section 501c3 of the Internal Revenue Code. Your gift is tax deductible to the extent allowed by law.**