ABOUT YORKVILLE AREA CHAMBER OF COMMERCE LEADS GROUPS
Leads Groups meet regularly for the purpose of sharing leads and referrals. Participation in a Leads Group is a highly recommended way to grow your business. Maintaining industry exclusivity, only one member in a business class may join a group. Each participant must be a Chamber member. A firm may have a representative in only one group.

Leads Group dues are $50 annually, renewing in January, and are prorated for a period of less than a year for new mid-year enrollments. (Contact the Chamber or a facilitator for pro-rated fee schedule.)

How to join a Leads Group:

- Review the list posted at www.yorkvillechamber.org. Look for a meeting time that suits your schedule and consider the complementary fit with other businesses within each group.
- Contact the facilitator (listed below) to request an invitation to attend a meeting as a guest. You may visit each group two times before deciding to join. The invitation to attend as a guest is open to non-Chamber members, as well.
- Once you have visited and chosen a group, complete and submit an application to the facilitator. The group will consider whether there are conflicts with competing industries, and your membership will be approved or declined by vote at the next meeting.

Leads Group Information

**Leads: I**
Meets Thursdays
7:45 a.m.
At the Chamber office
Facilitator: Chris Bartosz
(630) 552-9710
chris@fvctech.com

**Leads: II**
Meets Thursdays
12:30 p.m.
At the Chamber office
Facilitator: Ashley Preciado
630-201-9191
ashley@rsioffice.com

**Leads: ignite**
Meets 2nd & 4th Tuesdays
8:30 a.m.
At the Chamber office
Facilitator: Shelly Sypien
630-393-9562
shelly.sypien@edwardjones.com

**Leads: Infinity**
Meets every other Wednesday
7:15 a.m.
At Sunfield’s Restaurant
Facilitator: Rosemarie Bakka
630-421-3883
rosemariesbakka@kw.com

Leads Group Application

APPLICATION FOR LEADS GROUP: (circle one) Leads: I Leads: II Leads: ignite Leads: Infinity DATE: _________________________________

NAME OF BUSINESS: ____________________________________________________________

ADDRESS: ______________________________________________________________ CITY, STATE, ZIP: ____________________________

TELEPHONE: ______________________ E-MAIL: _________________________________

DESCRIPTION OF BUSINESS: ________________________________________________

ASSOCIATE WHO WILL REPRESENT THE BUSINESS IN LEADS GROUP: ____________________________

POSITION WITH COMPANY: ______________________ BUSINESS CATEGORY YOU ARE APPLYING FOR: ______________________

WHAT SPECIFIC PRODUCTS OR SERVICES WILL YOU REPRESENT IN THE GROUP?
(Example: Banking-Commercial or Banking-Mortgages): ____________________________

WHAT IS AN IDEAL LEAD FOR YOUR COMPANY? ________________________________

APPLICANT SIGNATURE: ________________________________

DATE APPLICANT APPROVED: ______________ SIGNATURE OF FACILITATOR: ______________