

# THE EPILEPSY FOUNDATION

of Victoria Incorporated

REG.NO. A0022674D

A member of **Epilepsy Australia** Australia's leading consumer led epilepsy organisation

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## Development Manager:

Jeremy Maxwell

## Research Policy Officer:

Rosemary Panelli

## Accountant:

Les Horovitz

## Membership invitation for the Epilepsy Foundation The Victorian affiliate of Epilepsy Australia

We would like to invite you to become a member of the Epilepsy Foundation of Victoria – or to renew your current membership.

### By being a member of the EFV you

- actively support a community organisation that counsels between 5,000 and 7,000 individuals and families living with epilepsy each year. ***The vast majority of the work we do is undertaken free of charge.***
- help maintain four Epilepsy Foundation offices in regional Victoria as well as our head office in Melbourne
- help us have the capacity to run over 250 education seminars annually
- lend important support to Epilepsy Australia, the leading consumer led epilepsy organisation in Australia
- help us keep working to support people living with the most common of all serious brain disorders affecting many, many thousands more young Australians than any other serious neurological condition
- help us undertake practical research into many of the complex social and clinical issues to which epilepsy often gives rise.

### As a member you

- will have borrowing rights with our library – for over 1500 books, videos and other epilepsy related materials
- will be eligible to vote at Annual General Meetings and Special Members Meetings
- will receive significant discounts for seminars and conferences and for items sold by the Foundation
- will receive notices, bulletins, Annual Reports, newsletters, magazines or any other publications used to keep in touch with members

Second only to stroke in prevalence as a chronic neurological condition, epilepsy is - as the World Health Organisation described it - arguably the most misunderstood, stigmatised and under-resourced of all health conditions.

The past two years have seen the epilepsy movement facing many time consuming and ill-conceived challenges. While this has been occurring our staff, along with the staff of other Epilepsy Australia affiliates, have continued to provide a level of service that is responsive to the real needs of those seeking support. And in our efforts at continuous improvement our services staff have all gained national accreditation as workplace trainers and assessors. They have also undergone rigorous training in solution oriented counselling.

The Epilepsy Foundation has successfully helped form the Joint Epilepsy Council of Australia which is now the official chapter of the International League for Epilepsy. We hope that the joint council will increase dialogue in the community and with government, about epilepsy and the tremendous burden it often places on Australian families and individuals.

As many members are aware, from helping us with our strategy planning exercise, there is much that still needs to be done.

We very much look forward to having you as a part of the important work we are doing.



Russell Pollard CEO

# Membership Application Form

You may have either a concessional or ordinary membership. If you wish to take out a concessional membership for \$15 please enclose photocopy evidence that you hold a student concession card or receive an aged, social welfare or war service pension or unemployment benefits.

**Yes** I would like to subscribe to the Epilepsy Foundation as a member.

Please circle one figure – in the right hand column - to tell us which kind of membership you would like.

<b>Concessional membership</b>	<b>\$15</b>
<b>Ordinary membership</b>	<b>\$30</b>

I also wish to make a single donation to the Foundation of \$ \_\_\_\_\_ -

<p>If you would like to make your indicated donation on a regular basis via the credit card number you provide on this form please tick one of the <i>regular donation boxes</i> below.</p> <p><b>Regular donation box:</b></p> <p>Monthly: <input type="checkbox"/>    3 Monthly: <input type="checkbox"/>    6 monthly: <input type="checkbox"/>    Yearly: <input type="checkbox"/></p> <p>If you do not tick a <i>regular donation box</i> [above] and still make a donation by ticking one of the boxes on the right, please be assured that we will only take the donation you are offering on this occasion.</p>	<p>\$5 - <input type="checkbox"/></p> <p>\$10 - <input type="checkbox"/></p> <p>\$20 - <input type="checkbox"/></p> <p>\$50 - <input type="checkbox"/></p> <p>\$100 - <input type="checkbox"/></p> <p>\$500 - <input type="checkbox"/></p>
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Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone: (H) \_\_\_\_\_ (Wk) \_\_\_\_\_ (Mob) \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Involvement with epilepsy: \_\_\_\_\_

**I will pay a total of \$ \_\_\_\_\_**

**If I have ticked the *regular donation box* above, I also authorize that it be made from the following account (only credit cards pls):**

Cheque/Money Order     Diners     Amex     Visa     Mastercard     Bankcard

Credit Card Number: \_\_\_\_\_ Expiry date:    /    /

Signature: \_\_\_\_\_

Cardholder's name: \_\_\_\_\_

*Return to: The Membership Officer  
Epilepsy Foundation of Victoria, 818 Burke Road, CAMBERWELL VIC 3124*