## The AIMS of this support group are to:

- 1. Provide support for people living with lymphoedema: Many people with lymphoedema have no contact with others who have the condition and as a result feel 'different' and isolated. The Lymphoedema Support group of NSW, through its various meetings, provides a safe place for a gathering of patients, family members and friends where they can share experiences, vent anger, sorrow etc., as well as cultivate a positive fighting attitude
- 2. Provide information and education on lymphoedema to the individual and their families: By providing information about lymphoedema and reassurance that it can be managed, the support group can help alleviate feelings of helplessness and hopelessness. Information can be given on such issues as: understanding what lymphoedema is; principles of management and details of current methods of treatment; how to access management; and, other related educational topics
- 3. Increase awareness of lymphoedema and possible management strategies to health care professionals.

## Meetings

<del>} </del>

## Regular meetings are held at:

Western Sydney -Katrina: (02) 9845 6500

South Eastern Sydney Liane O'Brien: (02) 9113 2163

Northern Sydney –
 Carolyn Cooper: 0438773978 or
 Helga Palmer: (02) 4370 1002

 Upper Hunter/New England -Alison Waugh: 02 6760 9042.

• Hunter -

Joy-Anne Ryder: 02 4959 7373 or Sue Harley: 02 4930 7115

• Central Coast -

Debbie Cooper: 0409713730 or Kathy Bruderlin: 0421363865

• Coffs Harbour -

Lyn Williams: 02 6656-5745

• South Western Sydney (no meetings at present)

For info: Theresa: (02) 9828 4703

## New Membership application

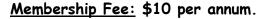
I would like to apply for new membership $\Box$
Date
First name
Surname
Postal address
Suburb
Postcode
Phone (H)
Phone (W)
Mobile
E-mail
Membership Renewal
I would like to renew my membership   Date

Please complete the above address and contact details if changed since last membership renewal.

First Name

Surname

Your age?				
under 20 30 - 39		20 - 29 40 - 49		
50 - 59 70 - 79		60 - 69 80 - 89		
<u>Gender?</u> Female		Male		
Occupation _				
Please tick the following box as you feel is most appropriate to you:				
<ul> <li>□ I am a health care professional</li> <li>□ I am a carer</li> <li>□ I am at risk of developing lymphoedema</li> <li>□ I have been medically diagnosed as having lymphoedema</li> </ul>				
My lymphoed my arm/s my leg/s other	dema d			
I have been diagnosed as having; Secondary lymphoedema □ Primary lymphoedema □ Unsure □				
For Office us Payment type Receipt Num		: Cash Cheque Money order		



The membership year is from July 1<sup>st</sup> - June 30<sup>th</sup>. Fees fall due July 1<sup>st</sup> each year.

Please make cheques payable to:

Lymphoedema Support Group of NSW

<u>Please forward your completed</u> <u>registration form and subscription to:</u>

Lymphoedema Support Group of NSW, PO BOX 58 WAHROONGA NSW 2076

For further information please call the Support Group phone line on 02 9402 5625



Providing support for people living with lymphoedema

Membership
Application and
Renewal