

## Membership Form 2025/2026

### VISION

To see a world where people with epilepsy are included and accepted without discrimination.

### MISSION

To promote the human rights of persons living with Epilepsy.

We are thrilled that you are considering joining our organisation or renewing your membership with us. We have been around since 1967! We are the only national organisation in South Africa offering specialised and comprehensive services to persons with and affected by Epilepsy. Our aim is to enhance and improve the quality of life of all persons living with Epilepsy.

Epilepsy SA represents the voice of persons with and affected by Epilepsy. We would like our members to become involved in our programs and we are committed to keeping you updated on activities within the organisation throughout the year.

### Why Become a Member?

- 🔥 You join a registered organisation whose main mission is to support people who live with epilepsy.
- 🔥 You will receive a Bi-annual EpiNews Magazine.
- 🔥 You access individualized programs and services, including free counselling/support groups and community-based programs.
- 🔥 Join our online Facebook support group and contribute to the national conversation about lowering stigma and increasing awareness about epilepsy.
- 🔥 Join volunteer initiatives and build lasting relationships with like-minded community members.
- 🔥 Access to annual awards – Flame of Courage.
- 🔥 Social events and networking initiatives.
- 🔥 Make a difference by sharing your experiences, skills and hopes for a better future for all who live with Epilepsy at our functions and events.

**Raising Awareness and educating all South Africans on Epilepsy  
is critical and we NEED you!**

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### Types of Membership

#### 1. Membership Criteria as per the National Constitution:

The organization recognizes:

- 7.1. **Full membership:** Individual membership awarded to persons with Epilepsy or directly affected by Epilepsy or have any other disability. The full members must identify with the aims of the organisation. The full members are paying members and have full voting rights at the Annual General Meeting.
- 7.2. **Affiliation Members:** Individual membership awarded to persons who identify with the aims of the organisation. The Affiliate members are paying members and have full voting rights at the Annual General Meeting. Approved at the Annual General Meeting 28th September 2024.
- 7.3. **Associate membership:** Associate membership awarded to persons with, persons affected by epilepsy and other disabilities who identify with the aims of the organization, the associate members are non-paying members and have no voting rights at an Annual General Meeting.
- 7.4. **National membership** shall be awarded to:
  - ✓ Individuals at the sole discretion of the National Executive Committee.
  - ✓ Groups or organizations at the sole discretion of the National Board.
  - ✓ Associate membership at the sole discretion of the National Executive Committee.

The National Board may determine the conditions and criteria for national membership. Application for membership that does not comply with such conditions and criteria may be refused by the National Board. A member of the National Office automatically obtains membership of the national body via the proxy held by the elected National Office representative to the National Board.

A member of a Branch automatically obtains membership of the national body via the proxy held by elected Branch representatives to the National Board. Staff members of the organisation and Associate may choose to become non-voting members of the organisation but shall not be considered in the determination of a quorum.

## Membership Form 2025/2026

Please complete the information below and return it to us:

|                                                |  |
|------------------------------------------------|--|
| Full Name:                                     |  |
| Postal Address:                                |  |
| Contact Number:                                |  |
| Email Address:                                 |  |
| Date of Birth:                                 |  |
| Gender:                                        |  |
| Race:                                          |  |
| Language:                                      |  |
| Disability:                                    |  |
| Membership Type:<br>Full or Affiliation Member |  |
| Signed:                                        |  |

☐ By completing this form, and ticking this box, I accept that I will be added to the mailing list of Epilepsy South Africa.

### Individual Membership Cost:

R120 per annum, this can be paid by Electronic Funds Transfer.  
(The year runs from 1st April to 31 March, no pro-rata is given)

### Please send Proof of Payment to:

[membership@epilepsy.org.za](mailto:membership@epilepsy.org.za) and/or for more information call us on  
National Contact Number: +27 79 119 3607



**Bank account: Epilepsy SA, ABSA, Current Account: 4077133143 , Branch Code: 632005**  
**Payment Reference: Initials and Surname**

This agreement applies to all personal information as defined in the Protection of Personal Information Act, 4 of 2013 (POPI). By submitting personal information, both Parties consent to its processing for all purposes related to this agreement. The Parties agree to comply with POPI and ensure their Affiliates do the same. Personal information may only be processed, disclosed, or used to provide services/products under the agreement, fulfill obligations, or as expressly authorized in writing. Disclosure to third parties requires prior written consent unless required by law or a regulator.