



26 Manor Green • Harwell • Oxfordshire • OX11 0DQ • 01235 820921  
www.pelvicpartnership.org.uk • contact@pelvicpartnership.org.uk

*The Pelvic Partnership provides information and support for women with Pelvic Girdle Pain • Charity registered in England no 1100373*

## Join the Pelvic Partnership today: Membership Form

### By joining the Pelvic Partnership you will:

- help us to support you and other women with PGP
- receive all three of our publications and our 'Stickmum' leaflet in your introductory pack
- have direct access to our on-line members' area with useful articles about the treatment and management of PGP written by committee members, women with PGP and healthcare professionals
- access to our 'My story' section with real stories from women with PGP about their road to recovery
- receive a regular Pelvic Partnership e-newsletter including event, meeting, fundraising and project information
- increase our campaigning power
- have access to up-to-date, research-based information
- have priority booking for conferences and support events

**Cost of membership for one year:** £15 UK membership  
£25 International membership

*If you cannot manage the full rate at present, please send us what you can afford. You do not have to make a financial donation to become a member or to use our services – simply complete the form with your contact details and return it to us.*

**Gift Aid** – an extra 20p for the Pelvic Partnership for every £1 from you. If someone in your household pays tax, and signs the gift aid declaration below, the money we receive is increased by 20% at no cost to you. *NB* If the Pelvic Partnership's claim is more than the tax paid by the donor, the donor will have to pay the difference to HMRC.

#### **Gift Aid declaration:**

*I am a UK taxpayer and agree that the Pelvic Partnership can reclaim tax paid on all donations I make after 6<sup>th</sup> April 2003. I will inform the charity if I cease to be a UK taxpayer.*

Signature..... Name ..... Date .....

Name: .....

Date: .....

Address: .....

Postcode ..... Telephone: .....

Email address: .....

Cheque enclosed  including additional donation of: £ .....

Please complete the form and send it with your cheque payable to:

'The Pelvic Partnership' to: 26 Manor Green, Harwell, Oxon, OX11 0DQ.



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## Your details: we collect these details to try to help you more effectively.

### About you:

*(Please note: Personal details will always remain confidential)*

1) Date of birth:

2) Is this information for you?  Yes  No

If not, is it for:  a friend  a relative  a patient? *(please tick one)*

If this is for a patient, what is your occupation?

**If this information is for you please continue to complete the form, otherwise please go to Q16, and thank you for joining the Pelvic Partnership**

### About you and your pain

3) How long have you had pelvic pain and when did it develop? (i.e. what year and what stage in the pregnancy or following birth).

4) Are you pregnant at the moment?  Yes  No

5) Is your pain related to pregnancy?  Yes  No

6) How many children do you have?

7) In which year(s) were they born?

8) Did you have PGP during each pregnancy?  Yes  No



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9) Do you still have pain now?  Yes  No

10) How would you rate the severity of your pain?

Where 0 is no pain and 10 is the most severe pain you have experienced

0 1 2 3 4 5 6 7 8 9 10

11) Have you had any treatment for your pain and from whom and what effect has this had?

12) Have you found any information from other sources and if so, what were they?

13) If there is anything about your condition or experience you would like to share with us or others please continue overleaf or on a separate sheet

14) Would you like one of our volunteers to call you about anything you have written in Q 13?

Yes  No

*We will try and do this within the next three weeks. If you would like to talk to someone before then, please contact our helpline on 01235 820921 .Please note that we are not medical practitioners so we cannot give advice.*

15) Would you be happy for us to print your story (or part of it) in the newsletter?

Yes  No

### About us

16) How did you find out about The Pelvic Partnership? *(please tick which one)*

- friend  flier in GP surgery/hospital  magazine article  pregnancy and birth book  
 internet  midwife  physiotherapist  GP  
 other (please tick one)

***Thank you for joining the Pelvic Partnership***