

Contact IA

Ileostomy?

Internal
Pouch?

IA

Ileostomy & Internal Pouch
Association

Registered Charity

www.iasupport.org

Contact IA

You may have been advised that you need to have bowel surgery and an ileostomy or an internal pouch formed. You may already be living with an ileostomy or an internal pouch or caring for someone who is.

Surgery can lead to feelings such as confusion, isolation or anger. It's a time when support from others who understand, who are living life after surgery, can make a difference.

IA offers local and national support where our volunteers are themselves living life with an ileostomy or an internal pouch. Living life to the full, enjoying the things that illness has often deprived them of or made it difficult to achieve.

Everyone has concerns following surgery. No matter how big or small you think they are, we can help. You might be thinking...

- How will I manage?
- When can I return to work?
- What about all the things I enjoy like holidays, sports, socialising and eating out with friends?

Don't let living with a stoma or an internal pouch hold you back from enjoying all the things you love to do.

Join IA... today

What does IA do?

- Visiting
- Quarterly Journal
- Internal Pouch
- Website
- Young IA
- Information days
- Members' Meetings
- Kock Pouch
- Advisory Services
- Medical Research
- Family & Carer Support

How can I join IA?

Full membership is open to anyone who has an ileostomy or internal pouch.

Associate membership is available to anyone who is interested in the work of IA, such as surgeons, doctors, nurses, family and friends.

To join IA, please complete the application form and return, together with your subscription, to the address below or join online at www.iasupport.org.

Membership (under 60): £15 annually

Membership (60 and over): £10 annually

IA National Office

Danehurst Court
35 - 37 West Street
Rochford, Essex
SS4 1BE

Phone: 0800 0184 724

Email: info@iasupport.org

Ileostomy and Internal Pouch Association is a company limited by guarantee. Company Number: 10375943 (England and Wales).

Application Form

(Block capitals please)

ENTER NAME OF GROUP TO JOIN - SEE REVERSE

Mr Mrs Miss Ms Other:

Full name:

Address:

Postcode:

Phone:

Mobile:

Email:

Date of birth (dd/mm/yy):

Surgery: ileostomy internal pouch
other none

Date of operation:

Reason for surgery:

How did you hear about us?:

I consent to IA holding details about my medical condition to enrich the membership services offered (A summary of how we use your data is overleaf).

Subscriptions (see annual subscriptions opposite)

I enclose a subscription of £

I also enclose a donation of £

Total enclosed £

SIGN HERE

DATE

Please send me a banker's order

Gift Aid: I confirm that I wish the charity to claim Gift Aid on this payment and all payments I make from the date of this declaration. I also confirm that I have paid UK Income Tax and/or Capital Gains Tax at least equal to the amount of tax that all the charities or Community Amateur Sports Clubs that I donate to will reclaim on my behalf for each tax year. I understand that other taxes such as VAT and Council Tax do not qualify

IA Member Organisations

North of England

Humberside
Manchester
Merseyside
North Eastern
North West Lancashire
& Cumbria
Sheffield & Rotherham
West Riding of Yorkshire
Wigan
York

Midlands

Birmingham
Coventry & District
Kettering & District
Leicestershire
Lincolnshire
Northampton
North Midlands &
Shropshire
Nottinghamshire &
Derbyshire
Peterborough & Wisbech
Sandwell & Walsall
Stourbridge
Three Counties -
Gloucester, Hereford,
Worcester

Southern England

Avon
Berks, Bucks & Oxon
Cornwall
Devon & Somerset
East London & South Essex
Hampshire & IOW
Kent
Norfolk & Suffolk
North Essex
North London
South East London &
West Kent
Surrey
Sussex
West Hants, Wilts & Dorset

Wales, Scotland & Ireland

North Wales
South Wales
Fife
Highland
North of Scotland
Tayside
West & Central Scotland
Northern Ireland
IA Ireland



Fair Processing Notice: Summary

What data we hold

If you join our organisation we will collect your contact details, the medical information you provide us with and your bank details so that we can take payment.

How we use your personal data

We use your personal data to assist with membership services. We also process personal data of a medical nature in order to help you and make your membership useful and meaningful. The collection of your medical information will be by your explicit consent. We will share your information with your local IA member organisation. IA will send regular communication to you regarding your membership such as renewal reminders, information and awareness events etc. We never share your details with companies providing goods and services, however from time to time you may receive information from them, but this will have been sent to you by IA on their behalf.

Your rights

You have the right to access, correct, sometimes delete and object to our processing of your personal information. You have the right to withdraw consent, where consent was previously given.

Our Fair Processing Notice(s) are available in full at www.iasupport.org/privacy and explain how we collect and use your personal information. Copies are also available by writing to the address below. If you want to get in touch our Data Protection Officer can be reached by email at dpo@iasupport.org or by post at:

[IA national office, Danehurst Court, 35-37 West Street, Rochford, Essex SS4 1BE.](#)