



Manolo, age 2



Conrad, age 12



Elizabeth, age 9

CHANGING LIVES FOREVER

Dear Friend of Epilepsy Support Network,

What a pleasure it is to share with you the successes made possible by your generous donations. The children featured above, Manolo, Conrad, and Elizabeth, are just a few of the multitude of individuals who are now seizure free or enjoying a much improved quality of life because of your support. Together, we have been an effective team in educating families about the importance of stopping seizures and saving lives.

You know first hand, how devastating it is to watch your loved one have a seizure. There is nothing more urgent than preventing the next seizure from happening. Your donation and our programs are the most powerful seizure stopping partnership. Please, make your donation today so we can prevent the next seizure and move closer to seizure freedom. We have made a promise to our members to be there in their time of need and your contribution allows us to keep that promise.

Working diligently to remain your favorite cause,

Janna L. Moore, MPA
Executive Director

BECAUSE WE ARE WORKING TOGETHER

“ESNOC has been an amazing resource for our family. We love the supportive community and the invaluable opportunities for learning from staff, experts and other families. Connecting with other parents and Manolo connecting with other children has been incredible.”

Rebeca, mom of Manolo

“ESNOC was there for me while my first was diagnosed with epilepsy, and I was educated and prepared when my second child was diagnosed, thanks to the expertise, preparation and knowledge sharing of ESNOC. Thank you ESNOC, our family would have been lost without you.”

Lisa, mom of Conrad & Elizabeth

Doesn't your loved one with epilepsy deserve to have the last seizure truly be the last seizure? With your donation, that begins today.

Yes, count me in!

- \$1,000 I'd like to fund 5 Seizure Recognition & First Aid Presentations
- \$500 I'd like to fund an Expert Speaker Meeting
- \$365 Seizure Free is worth a dollar a day!
- \$250 I'd like to fund 1 Friday Friends Club
- \$100 I'd like to fund 2 New Member Intakes
- Other \$ _____

Any amount can make a success story.

Payment Information

Amount \$ _____

Check **Credit Card:** Discover Mastercard Visa

Name on card _____

Card number _____

Expiration date _____ CVV _____

Signature _____

Billing zip code _____