



# Caring For Diabetes





## Diabetes Explained

“The Diabetes Federation of Ireland is delighted to add this booklet to its range of diabetes literature. I know it will become a valuable resource booklet for people with diabetes when diabetes management is not the most important medical concern or for people who have responsibility for the management of diabetes in another person”.

*Mr. Kieran O’Leary, Diabetes Federation of Ireland.*

“Novo Nordisk.....”

*Ms. Jan Goulding, Senior Product Manager, Novo Nordisk.*



## Introduction

Ten out of every 100 people over the age of 65 in Ireland have diabetes. The aim of this booklet is to help you understand more about diabetes, its effects and the special care needed to help a person with diabetes stay healthy. It is divided into two sections. Part 1 looks at diabetes and general self-management for the older person. Part 2 looks at those people who may be unable to look after themselves and need assistance



## What is Diabetes?

Diabetes mellitus is a condition in which there is too much glucose in the blood. This happens because there is not enough insulin to move glucose into cells. Glucose is needed in all cells in the body for heat and energy.

Glucose comes from all foods that we eat but especially from starchy foods, e.g. bread, cakes biscuits. It is broken down in the stomach and moves into the blood stream. Insulin is produced in the pancreas and is needed to move the glucose from the blood into cells. Some people just do not produce enough insulin to cope with their body's needs. Without it, sugar from the food we eat cannot be converted into the energy required to keep you healthy. Unused sugar builds up in the blood and spills out into the urine. Being overweight or not being active puts more demands on the body and increases the risk of not being able to produce enough insulin.

## How do you know when you have Diabetes?

The main symptoms of untreated diabetes or high blood sugars are increased thirst, passing a lot of urine, tiredness, blurring of vision and recurrent infections. The symptoms of diabetes can be so unclear that people put the problems they have down to "getting older" or other medications. You should have a test done every year (for those over 65 years) to check if you could have diabetes. This is done by your local doctor using a simple finger prick to check your blood glucose levels. The normal levels are less than 6mmols when you have not eaten and less than 7 mmols after eating. If your levels are higher than those, diabetes may be suspected and more tests may be necessary.



## Types of Diabetes

There are two main types of diabetes.

**Type 1** diabetes develops when there is a severe shortage of insulin in the body. This type of diabetes usually appears in people of normal weight under the age of 40 years.

**Type 2** diabetes develops when the body produces some but not sufficient insulin to meet the demands of the body. This type of diabetes usually appears in the older person and is often associated with being overweight and inactive. Type 2 diabetes is probably the type of diabetes you have but check with your doctor. Type 2 diabetes is treated with diet and exercise, but some people will need tablets and maybe insulin by injection.

## Is Diabetes preventable?

Yes and No. Diabetes may be hereditary, which means that some families are more at risk than others. However, recent research has proven that eating a healthy diet and exercising regularly can help you to reduce your risk of getting type 2 diabetes in later life. There is a small percentage of people who are of normal weight and are active that develop type 2 diabetes and unfortunately, diabetes can not be prevented in this group of people.

*The cause of type 2 diabetes is unknown but some factors put you more at risk*

- Being aged 45 or older
- Being overweight
- Have a family member with Type 2 diabetes – brother, sister, parent.
- Had a large baby or gestational diabetes
- Not being active.



## High Blood Sugars

Treatment of diabetes is to keep blood sugars near normal levels. High blood sugars in the short term will leave you feeling unwell and tired. High blood sugars over a long period can lead to eye disease, heart problems, foot ulcers and high blood pressure. The life threatening nature of diabetes results from complications such as kidney failure, heart attacks and stroke rather than the condition itself. Everyone with diabetes can reduce their risk of future ill-health by living healthily, keeping an eye on their blood glucose levels and taking the medication prescribed for them at the correct times.

## How will Diabetes affect my life?

You may need to make some changes in your life when diagnosed with diabetes. You need to have a healthy diet and try to lose weight if you are overweight. You should try to exercise to the best level you can. Talk to your doctor or nurse about the most suitable type and intensity of exercise to fit into your lifestyle and general health. You should give up smoking as it is damaging your health and especially so when you have diabetes. You will need to have regular checks with your diabetes team and they may ask you to do some tests at home. If you drive a car, you will need to inform the Vehicle Licensing Authority who will request a medical report from your general practitioner before the next renewal of the license. You will also need to inform your car insurance company. There is no loading on your car insurance for having diabetes. You can take holidays abroad (discuss this with your diabetes team before booking) but will need to have adequate holiday insurance. You must declare diabetes to the holiday insurance company or risk non-coverage



## Healthy Diet

For all types of diabetes, healthy eating is the basis of treatment, and in many cases, diet along with regular exercise is the only treatment needed to control blood glucose levels. Although 'diet' commonly implies weight loss by reducing calories, it also means control of food intake.

Each person with diabetes should have a meeting with a qualified dietician, who should be a member of the Institute of Nutrition & Dietetics of Ireland (I.N.D.I.). The dietician can give you an individualised tailored eating plan, taking into account your medication, body weight, lifestyle, likes and dislikes so that the plan suits your needs and lifestyle.

The diet for a person with diabetes is the same as the ideal healthy balanced diet for all. Everyone in the household should stick to the same guidelines on healthy eating as the person with diabetes. Here are some practical guidelines to help you choose a healthy diet

- Choose a wide variety of fresh products and enjoy your meals in a relaxed environment.
- Have regular meals at regular times each day. Try not to eat after 8 pm unless instructed to do so in order to prevent low blood sugars
- Choose plenty of fruits, vegetables and salads (either fresh, frozen or tinned in natural juices)
- Carbohydrate is the main source of fuel for your body so have some starchy foods at each meal/snack
- Choose moderate amounts of protein – two small portions are all that are needed in the day.
- Choose small amounts of saturated fats – saturated fats are the animal fats that are solid at room temperature- and remove any visible fat during preparation
- Choose low fat ways of cooking food e.g. oven bake, grill, poach etc.
- Choose plenty of fluid, aim to drink approximately 8 glasses of fluid each day – water is best
- Limit your alcohol intake. The maximum recommended intake of alcohol for a healthy male is 3 units per day for a man and 2 units per day for a woman with a few alcohol free days per week.
- Reduce your salt intake – flavour foods with herbs/spices, avoid foods high in salt e.g. bacon, pickled or smoked foods, canned soups, crisps etc.
- Choose diet or healthy options of foods when possible as these tend to be lower in fat and sugar.
- Learn to read food labels





## What are Carbohydrates?

*Carbohydrates come in three different types*

**Sugars** e.g. cakes, sweets, jams, etc. These are quickly converted into sugar.

**Starches** e.g. bread, pasta, potatoes, rice, some cereals etc.

**Fibre** e.g. wholemeal bread and wholemeal cereals, fruit, beans etc.

Sugary foods cause a fast rise in blood sugar levels which does not allow your body to respond quick enough to keep your blood sugar levels within normal limits. Therefore, these should be limited and included as part of the meal. High fibre foods change into sugar more slowly and are better.

## What are Proteins?

Protein provides 10-15% of energy in the diet and is essential because all of the cells in the body are made up of protein. Protein is necessary for tissue growth and repair.



## What about fats?

Fats are an important provider of energy, vitamins A,D, E, and K and essential fatty acids. However, all fats are not equal – some are harmful and need to be reduced to limit damage to your health.

**Saturated Fats** increase the levels of bad cholesterol (LDL) in the blood and too much can cause hardening of the arteries. Saturated fats are found in fatty meat, meat products like sausages and full fat milk products. Manufactured foods like biscuits, cakes, sweets and savoury snacks are other high sources. Limit these as much as possible and pick low fat milk products.

**Monounsaturated Fats** are found in olive oil, avocados and nuts and are a good substitute for saturated fats. Monounsaturated fats help to raise the good cholesterol (HDL) in the blood and are all right to take in very small quantities.

**Polyunsaturated Fats** are the essential fatty acids that your body needs and are found in vegetables and vegetable oils like rapeseed oil. The best source is fish with salmon, mackerel and oily fish having the highest amount.

**Trans Fats** are relatively new as they are man made. They develop when vegetable oils are heated to high temperatures and can be dangerous when eaten in excess. Eating trans fats regularly can raise the blood cholesterol to dangerously high levels in some people. Most of the trans fats are found in processed foods, like cakes, biscuits and pastries. Hydrogenated vegetable oil is another name for trans fats and if found on a label, it is best to select an alternative product.



## What about special 'diabetic foods'?

The diet for a person with diabetes is a healthy eating plan that all the population should be having. Diabetic foods are not necessary, are expensive and can be harmful to your health if taken in excess. Instead, look out for reduced sugar jams and marmalades, sugar free jellies and squashes and 'diet' or 'healthy options' in other products. Always buy the reduced or low fat varieties of dairy products.

Check out the booklet Food & Diet; Focus on Diabetes for more information. Available from all branches of Superquinn and from the Diabetes Federation of Ireland helpline locall- 1850 909 909.

## Food tips for older people

As you age, your body needs fewer calories, especially if you are not very active.

*It is easier to eat well when you plan for your meals and make them enjoyable. Try these tips:*

- Grocery shop with a friend. It is pleasant and can help save you money if you share items that you can only use half of, such as a bag of potatoes or head of cabbage.
- Cook ahead and freeze portions to have healthy and easy meals on hand for days when you do not feel like cooking.
- Keep frozen or canned vegetables, beans, and fruits on hand for quick and healthy additions to meals. Rinse canned vegetables and beans under cold running water to lower their salt content.
- Look for fruit canned in juice, instead of syrup.
- Set the table with a nice cloth and even a flower in a vase to make mealtime special.
- Eat regularly with someone whose company you enjoy
- Make home made soup with whatever vegetables you have available and an oxo cube. Liquidise for easier eating, if necessary.

*Remember*

- Make meal times social events.
- Join others for meals or start your own lunch club.
- If you get full quickly, eat little and often.
- Take as much exercise as you can, out of doors if possible (always check with your doctor before starting a new exercise routine).



## Finding it difficult to eat a healthy diet?

Older people may have problems that reduce their ability to chew foods or have a smaller appetite. This can make it difficult to eat a well-balanced diet.

*Here are some simple ways of increasing fibre in the diet:*

- Mash bananas and mix with diet yoghurt for a healthy meal
- Have porridge or Weetabix for breakfast or in the evening
- Add fruit to breakfast cereal
- Pour some sesame seeds over porridge or add bran flakes
- Squeeze fresh oranges and drink the juice
- Liquidize fruits or a mixture of fruit and vegetables.
- Add sultanas to scones
- Make home made soup by boiling fresh or frozen vegetables and adding herbs or stock. Liquidize for added convenience. Add a tin of tomatoes in herbs for a different flavour.
- Add stewed prunes or fruit to baked custard.
- Ask your chemist for supplementary drinks specialised for people with diabetes.

When eating out, a starter with soup can be a good option as a main course or ask for a half main course. When ordering food, ask for sauces on the side so that you can have as much as you need rather than having all the sauce. If you order a meal and if it is bigger than you expected, ask for part of it to be packed to bring home.

## Fluids

Drink 6 to 8 cups of fluid every day including water, tea and unsweetened fruit juice. A good fluid intake is important to keep enough fluid in your cells and blood. You may notice that you feel less thirsty as you get older, but your body still needs the same amount of water



## Exercise

Exercise is the key to good health as it helps to improve fitness, reduces body fat, lowers blood glucose levels and can lower blood pressure by relieving stress. In this way it also helps to reduce your risk of other conditions such as obesity, heart disease and cancers. Do exercises that you like and enjoy.

The human body is like a machine. Food and drink provide the energy to keep the machine going. If you take in more energy than your body uses, the surplus energy turns into fat and you put on weight. If you need to lose weight, you have to use up more energy than you take in. Almost anything you do uses energy so, you just need to move more. Every little counts, and getting more active will give you more energy, help you sleep better and improve your diabetes control. Being active in the garden is a great way to get exercise and socialise with neighbours.

### *Try these simple daily ways of increasing your activity level*

- Going up and down the stairs is one of the easiest ways to get active
- Get up to switch channels on the television
- Move around the room during commercial breaks in TV or radio programmes
- Get off the bus a stop earlier
- Park the car in the most distant part of the car park from where you are going
- Walk to the local shop

Walking is the most accessible and beneficial activity you can do. It is important to be safe when exercising. Also choose a safe place to walk. You can take a walk on your own or with company, in the rain or sunshine and most importantly at your own pace. Talk to your medical practitioner or nurse about the most appropriate exercise for you and how much you should have each day. For the majority of people, 30 minutes of brisk exercise that has you feeling warm but capable of carrying on a conversation is recommended.

The older you are, the more slowly you should start any new activity – every other day for as short a time as 3 minutes is recommended, adding more days as tolerated and lengthening the time until you reach a goal of 30 minutes. If the goal is to reduce weight, then you need to build up to an exercise programme of 40 minutes, 3-4 times a week. Determine what you can tolerate, then add between 1-5 minutes (depending on intensity of exercise) each week until you reach your goal.



### *Exercise benefits your health whether you have diabetes or not by:*

- Helping you to manage the stresses and strains of life
- Reducing blood pressure
- Reduces the risk of cardiovascular events
- Increased muscular strength and stamina
- The build up of muscle assists weight control
- Blood fats (triglycerides and cholesterol) are lowered
- Self esteem and self image are improved
- Increased sensitivity of the cell receptor site to insulin help to reduce insulin requirement and allows your own insulin supply to work better
- Prolonged regular exercise improves glycaemic control

### *Precautions in exercising:*

- Consult your healthcare professional before making major changes in levels of activity.
- Start slowly if you are not used to exercise
- Get expert medical advice before you begin something new
- If your diabetes treatment leaves you at risk of a hypoglycaemic episode, you should check your blood glucose before and after any physical activity. Also you may need to adjust carbohydrate intake and/or reduce insulin dosage
- Always have some quick acting carbohydrate easily available
- Take special precautions in any activity that you might get into difficulties e.g. swimming





## Heart Care

Diabetes and heart attacks (or cardiovascular disease) are often spoken about together. The reason is because having diabetes increases your risk of heart problems. Diabetes can worsen the effects of the other known risk factors that cause heart problems such as high fats in the blood, blood pressure, being overweight and smoking.

## Raised Blood Glucose

Blood glucose above the normal levels can cause damage to the smaller blood vessels and some parts of the nervous system. This can result in alerted heart rate, blood pressure and blood flow. Over time, this will cause heart problems. Check your blood glucose regularly or have your doctor check it by doing a A1c test which is a blood test that gives an total view of your glucose levels over three months.

## High Fats

High levels of blood fats (cholesterol) in particular LDL cholesterol is often associated with diabetes. High levels can lead to fat building up in medium and large blood vessels (known as atherosclerosis). There is a relationship between the LDL cholesterol levels and the risk of heart problems. However, for a person with diabetes, the risk starts at lower levels than for a person without diabetes.

Control your cholesterol by having a healthy low fat diet, regular exercise and reducing your weight if you are overweight.



## Obesity

Carrying extra weight is not good for your general health or your diabetes. Being overweight delays the action of insulin and stops it working affectively, which means that your diabetes may be difficult to control. The effect of carrying excess weight is even more harmful if the weight is carried around the belly.

## Hypertension

High blood glucose can affect your kidneys and cause a raise in blood pressure levels (hypertensions). High blood pressure means your heart is working harder than normal and putting your heart and arteries under greater strain. As with blood fats, there is a relationship between blood pressure and the risk of heart problems and for the person with diabetes, this risk commences at a lower level.

Control your blood pressure by reducing your fat and alcohol intake, exercise regularly and learn to manage stress (instead of letting it take over). If you are on medication for your diabetes or your blood pressure, make sure to take it.

## Smoking

Giving up smoking at any age can improve your health and reduce your risk of developing or worsening heart, circulation and lung problems in the future. Straight away you will feel the benefits, smell fresher and have more money to spend on other things. Take action to-day, and call the **Smoking Quitline 1850 201 203** for more information and assistance.





## Foot care

Your feet are the furthest part of your body from your heart and brain. As you get older, poor circulation and reduced feeling in the feet are commonplace. If you have diabetes, poor control will make poor circulation and reduced feeling in the feet a much more serious problem. Foot complications are the most common cause of hospital admissions for people with diabetes. Treat your feet with special care.

Feet should be washed daily in lukewarm water (test with your hand before putting in your feet). Feet should be dried thoroughly especially between the toes and a cream applied if the skin is dry. Don't use perfumed lotions. The feet should be examined for any changes in colour or broken skin. Use a mirror if you find it difficult to see parts of your feet. If you have eyesight problems, or cannot reach your feet, get another person to check your feet for you.

Choose your shoes carefully. Go to a shoe shop and have a qualified person check that the shoe is not tight at any spot. Laced shoes are best, but if you have difficulty doing up laces, there are many types with velcro fasteners. Remember, if you are buying special socks for circulation problems, wear these when checking out new shoes.

Socks should be made from cotton and have no obvious seams. Tight elastic at the top of the sock should be avoided. Similarly, people with diabetes should not wear garters.

If you have a medical card, you are entitled to go to a chiropodist for regular foot care. Choose a chiropodist registered with the Society of Chiropodists and Podiatrists of Ireland. You can find these listed in the phone directory or ask your practice nurse.

REMEMBER, it is important not to ignore or neglect any injury, no matter how small. If any new redness, swelling or discharge appears, contact a doctor immediately. Hot water bottles and electric blankets should only be used with great care.

### Never


- wear tight fitting footwear,
- treat corns with over the counter medications
- surgically remove old skin.



## Diabetes Review

*You have a general health check up each year. This should include:*

- A review of your general health
- An opportunity to discuss any problems you may have
- Discussion on your blood glucose results and new targets set with you. When a person has diabetes, normal levels of blood glucose levels are generally not used. It is better to discuss the target level decided by you and your diabetes team. Target levels are based on ability, physical health and general circumstances.
- Recording of weight, height and blood pressure.
- The opportunity to discuss your concerns about the foods you like to eat
- Urine and blood tests. The urine test may be a simple dipstick or you may need a 24-hour collection of urine. The blood tests are A1c, which gives a picture of overall glucose control in the previous 3 months. The recommended level is less than 7 %. Blood fats should also be checked. These include triglycerides and cholesterol. Fasting Triglycerides should be around 1.5 mmols/l and cholesterol should be less than 4.5 mmol/l. Cholesterol is broken down into good cholesterol (HDL) and this should be over 1.2mmols and bad cholesterol (LDL) and this should be less than 2.5mmols.
- Eye examination
- Review of injection technique and the places where insulin is injected if you are on insulin
- Feet should be checked for colour, temperature, feeling, and pulses.
- Discussion of overall results and what needs to be done before the next appointment.
- Date for next appointment is set.



## **When the person with diabetes is no longer able to take responsibility for their diabetes self-management.**

All persons with diabetes, regardless of who is responsible for their health should receive a level of diabetes care appropriate to their needs. All of the information contained in the first section of this leaflet is still applicable even when the person with diabetes requires support to maintain their diabetes management.

A named person should take responsibility for the daily diabetes needs. This will involve giving of a healthy diet, monitoring of blood sugar control and getting medical assistance when necessary. In order to carry this out properly, the person should be instructed in the individualised care of the person with diabetes by that person's diabetes team. If the carer is a qualified healthcare professional, they should meet with the person's diabetes team and take part in the annual review process. In residential care situations, the named person is accountable for their own diabetes education and passing on their diabetes knowledge to other healthcare workers responsible for the care of the patient with diabetes when they are not present.

The diet may need to be adjusted and the community dietician should be involved in making a detailed diet plan. Nutritional plans should take into account the nutritional state of the person, budgetary constraints, available cooking facilities, ability of carer to oversee cooking and serving of suitable meals, likes and dislikes of the person with diabetes. The plan should make provision for days when complete meals are not taken.

As people get frailer, they tend to be less thirsty but the body still needs the same amount of water. It is important that people drink 6 to 8 cups of fluid every day including water, tea and fruit juice. For people with diabetes, lack of fluids can cause dehydration which artificially raise the blood sugar level by concentrating it. High blood sugar levels in frail people can lead to incontinence in addition to increasing the risk of urinary infections. It is important that people drink 6 to 8 cups of fluid every day including water, tea and unsweetened fruit juice.

Monitoring of blood sugar should be discussed with the community or hospital based diabetes nurse specialist. If home blood glucose monitoring is necessary, targets should be set for fasting and post meal readings and appropriate guidelines written for when targets are not reached. The aim of diabetes care for the person who is no longer able to look after their own health is to maintain the highest degree of quality of life and well-being without subjecting the person to unnecessary actions. For many individuals, it may be appropriate to aim for blood sugar control which avoids the malaise, lethargy and urinary frequency of high blood sugars, whilst permitting the highest level of physical and mental function to be attained.

## **Acknowledgements**

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Diabetes Federation of Ireland.

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Advanced Nurse Practitioner,  
Mater Hospital.

Ms. Catriona Connelly, M.I.N.D.I.  
Senior Dietitian,  
Mater Hospital.

# Membership Form

## Welcome to the Diabetes Federation of Ireland

Since 1967 the Diabetes Federation of Ireland has been dedicated to helping people with diabetes. Through its network of support branches and other services throughout the country, people who have an interest in diabetes are dedicated to sourcing and sharing information on diabetes and related matters.

## What are the aims of the federation?

- To represent people with diabetes
- To help and provide information for people with diabetes, their families and the community
- To create awareness and to foster programmes for early detection of diabetes
- To support and encourage advances in diabetes care and research
- To raise funds which make the achievement of these aims possible

People like you help fund our vital work, through membership. The Diabetes Federation of Ireland offers a wealth of benefits to members such as:

- Receipt of our official information-packed bi-monthly magazine "Diabetes Ireland"
- Information booklet "Living with Diabetes"
- Access to a wide range of quality diabetes publications, many free of charge
- Knowledge that you are making a valuable contribution to the Diabetes Federation of Ireland in its search to find a cure and better ways to care for the condition
- Support our work to fight discrimination against people with diabetes
- Access to local support groups and regional branches
- Access to unique insurance schemes that are not available to non-members

## Tax Relief for the Diabetes Federation of Ireland

The 2001 Finance Act allows the Diabetes Federation of Ireland as a registered charity to reclaim the tax paid by an individual on a donation of €254.00 or more. For example, an individual PAYE taxpayer who donates €254.00 and completes the form giving details of the donation and their PPS number, allows the Federation to claim back the tax already paid on the €254.00 directly from Revenue.

**Please see overleaf for membership categories, payment methods and how to make a donation to the Diabetes Federation of Ireland and return the relevant sections to us at: 76 Lower Gardiner Street, Dublin 1.**

# Membership Form

## Your details

Title \_\_\_\_\_ First Name \_\_\_\_\_

\_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Tel. (Home) \_\_\_\_\_

\_\_\_\_\_ Tel. (Work) \_\_\_\_\_

\_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_ Date of Birth \_\_\_\_\_

Type of Diabetes  Type 1 (insulin dependent)

Type 2 (non-insulin dependent)

\_\_\_\_\_

## Membership Categories

Please tick box indicating the membership you require

Full rate adult membership €30.00

Family rate €35.00   
(includes Sweetpea Kidz Club membership for children with diabetes up to 12 years old. Complete your child details overleaf)

Concessionary rate €20.00   
(Senior Citizen, full-time student)

Professional Service Section €35.00

## How to pay for membership and make a donation

We want to make it as easy as possible for you to join the Diabetes Federation or make a donation. Therefore, the following payment options are available to you:

- 1 Credit Card
- 2 Cheque/Postal Order
- 3 Direct debit
- 4 Direct Debit Monthly Draw
- 5 Online membership at [www.diabetes.ie](http://www.diabetes.ie)

### 1. I want to pay by Credit card.

To pay by credit card simply call the Federation on LoCall no. 1850 909 909 (office hours) with your credit card details. Alternatively complete the following section.

Visa  Mastercard

Card number \_\_\_\_\_

Expiry date \_\_\_\_\_ (MMYY)

My credit card will be debited for the membership amount of € \_\_\_\_\_

I also want to make a donation to the Federation of € \_\_\_\_\_

Please debit my credit card for the total amount of € \_\_\_\_\_



## Membership Form

### 2. I want to pay by cheque/postal order.

Please make your cheque/postal order payable to the Diabetes Federation of Ireland and indicate the appropriate amount payable.

My cheque/postal order covers the membership amount of € \_\_\_\_\_

I also want to make a donation to the Federation of € \_\_\_\_\_

The total amount indicated on my cheque/postal order is € \_\_\_\_\_

### 3. I want to pay by Direct Debit.

Instruction to your bank to pay direct debits  
**Please complete parts A to E to instruct your Bank to make payments directly from your account.**

Originator's Identification Number **302526**

Originator's Reference \_\_\_\_\_

**A** The manager of

\_\_\_\_\_ Bank

**B** Name of account holder \_\_\_\_\_

**C** Sort Code  -  -

Account Number

**D** Membership No. DFI \_\_\_\_\_

### **E** Your instructions to the bank, and signature

I instruct you to pay Direct Debit from my account at the request of Diabetes Federation of Ireland.

The amounts are variable and may be debited on various dates.

I understand that Diabetes Federation of Ireland may change the amounts and dates only after giving me prior notice.

I shall inform the Bank in writing if I wish to cancel this instruction.

I understand that if any Direct Debit is paid which breaks the terms of the instruction, the Bank will make a refund.

Signature(s) \_\_\_\_\_

Date \_\_\_\_\_

### 4. Direct Debit Monthly Draw.

With this option you will donate €5 per month and be entered into a monthly draw with a first prize of €500. In return you will receive free annual membership and continue to be a valued member receiving full Federation member benefits, and through your extra donation support the ongoing work of the Federation. To be entered into the monthly draw for €500 simply complete section 3, and tick this box

and sign here \_\_\_\_\_

## Membership Form

### 5. Online Membership

I want to join online.

Log onto [www.diabetes.ie](http://www.diabetes.ie) for details

### **Your Child's Details: Application form for Sweetpea Kidz Club Membership**

Please complete this information in Block Capitals for inclusion on your Sweetpea Kidz Club Identity Card.

#### **I have Diabetes**

My name is \_\_\_\_\_

Membership no. \_\_\_\_\_

Date of Birth \_\_\_\_\_

#### **In case of emergency please contact**

Name \_\_\_\_\_

Tel. no. 1 \_\_\_\_\_

Tel. no. 2 \_\_\_\_\_



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