



Phoenix Survivor Network Membership Application

All of the information provided will be kept confidential and will only be used to recommend the best programs to fit your needs.

Please tell us about yourself

Name _____

Address _____

City/Town _____

State and Zip Code _____

Email Address _____

Phone Number _____

Emergency Contact

Name _____ Relationship _____

Phone Number _____

How did you hear about Phoenix Survivor Network?

Survivor/Thriver _____
Social Media _____
Family/Friend _____
Medical Professional _____
Other (please explain) _____

Gender
Female _____ Male _____

Race/Ethnicity (optional)
American Indian or Alaska Native _____
Asian _____
Black or African American _____
Hispanic or Latino _____
Native Hawaiian or Other Pacific Islander _____
White _____
Other (please specify) _____

Your Age Group
14-21 _____
22-30 _____
31-40 _____
41+ _____

Date of Birth _____

*Are you a breast cancer survivor?

Yes _____ No _____

Are you living with Metastatic Breast Cancer?

Yes _____ No _____

Are you a survivor of another type of cancer?

Yes _____ No _____

If yes, please specify:

Are you a (select all that apply):

Family member of a breast cancer survivor _____
Friend of a breast cancer survivor _____
Caregiver of a breast cancer survivor _____
High risk for breast cancer _____
Bereaved _____
Other (please specify) _____

Do you have child(ren) under the age of 18? Yes _____ No _____

If so, please list each child's gender and age:

Phoenix Programs

Please select your programs of interest:

Talk Circles (talk therapy)

Individual _____ Group _____

The Journey

Newly diagnosed _____ Post Treatment _____ Long Term _____

The Temple

- Yoga _____
- Tai Chi _____
- Bell Dancing _____
- Boxing _____
- Marital Arts _____
- Stepping _____
- Line Dancing _____
- Walk Away the Worry _____
- Zumbi _____
- Massage Therapy _____
- Healthy eating classes & demonstrations _____

Flame On - Peer Buddy Program _____

Prayed Up - non-denominational pray group _____

Parenting Groups _____

Book Talks _____

Creative Corner

- Ceramics _____
- Jewelry making _____
- Woodwork _____
- Painting _____
- Digital art/Photography _____

Money Matters _____

One Girl, One Boy (youth programs, ages 5-17) _____

List other programs you would like PSN to offer

Member Signature _____ Date
