## Revive2Thrive Retreat Application



October 1-3, 2025 (Wednesday-Friday morning)
HollyHedge Estate | 6987 Upper York Road, New Hope, PA

Personal Information
Full Name:
Preferred Name/Nickname (if any):
Date of Birth: Phone Number:
Email Address:
Home Address:
Your Journey
1. Have you received a breast cancer diagnosis (at any stage)?
□ Yes □ No
(This retreat is for individuals who have had a breast cancer diagnosis.)
2. Briefly share a few words about your healing journey or why you feel called to attend:
3. What does "thriving" mean to you right now?
Health & Participation
This retreat includes light movement, uneven terrain (steps, grassy areas), and optional holistic therapies.
4. Are you physically able and willing to participate in these activities with reasonable accommodations?
☐ Yes ☐ No ☐ I am not sure – please contact me to discuss
5. Any mobility limitations or health needs we should know about?



## **Medical Provider Sign-Off**

Please have your provider confirm:

## **Retreat Cost**

□ Yes

☐ Yes

The cost to attend the Revive2Thrive Retreat is \$100.

□ No (please explain):

☐ Maybe

Do you need transportation assistance?

□ No

Please note: Payment is not due at the time of application. You will only be asked to pay once your application has been accepted.

Space for this retreat is limited. As long as basic eligibility and required documentation are met, participants will be selected through a process designed to ensure a balanced and inclusive experience. Due to space constraints, not all applicants may be selected this round — but future opportunities will be available.

## **Submit Your Application**

Deadline: August 1, 2025

Submit via email to: revive2thrivepa@gmail.com

Questions? Call us at 215-530-3122

Website: revive2thrivepa.com