

# 17 Years of

# Join TEAM ABI!

Take a step on the journey to recovery from Brain Injury!

### ACHIEVE MORE TOGETHER

## Saturday, March 23, 2024 8am - 1pm

8-9am — Check-in, pick up t-shirts, team photos, warm-up 9:15am — Walk starts

### Mission Bay Park — De Anza Cove 2740 De Anza Rd, San Diego, CA 92109

Team ABI has always been one of the top fundraisers—so let's do it again for the 17th Annual SDBIF surviveHEADSTRONG celebration! We walk/roll, advocate, educate and celebrate as a team.

The surviveHEADSTRONG is your walk—whether you walk, roll or cheer the others on, it is always fun and rewarding. With each step you help SDBIF raise funds to provide life-changing resources for fellow San Diegans recovering from brain injury.

### survive HEADSTRONG — Celebrating Brain Injury Recovery \*2024 Team ABI Registration\*

Register of little at www.subir.org/teamabl of this out and feturit this registration for in to subir at.
P.O. Box 84601 San Diego, CA 92138
<b>REGISTRATION FEE:</b> (Each walker must complete a seperate registration form and sign the waiver at the bottom of this form.)
o \$30 - Adult, age 18+ (includes T-shirt)
o \$20 - Adult Survivor, age 18+(includes T-shirt)
o \$20 - Survivor, under 18 years old (includes T-shirt) *Parent or Legal Guardian must sign this form below
o \$20 - Minor, under 18 years old (includes T-shirt) *Parent or Legal Guardian must sign this form below
O FREE - Infant to 4 yrs (T-shirt not included) *Parent or Legal Guardian must sign this form below
REGISTER TODAY! T-shirts cannot be gauranteed if you register after February 24, 2024
<b>WALKER INFO:</b> Please fill in your contact information, including your t-shirt size, and sign the waiver at the bottom of this form.
Name
Address
City State Zip
Phone
E-Mail
T-Shirt Size (Choose only one size) *T-shirts cannot be gauranteed if you register after February 24, 2024
Adult size: O Small O Medium O Large O X-Large
O I am walking in honor of:
Honoree's E-mail:
O I am walking in memory of:
o I am walking with a team: Team ABI
O I am walking and would also like to make a tax-deductible donation for: \$
o I am unable to attend the walk, please accept my tax-deductible donation for: \$
PAYMENT INFO:
o Check enclosed for: \$
O Charge my Credit Card: [] Visa / [] Master Card
Credit Card Number Exp Date Sec Code

WAIVER: I hearby waive all claims against the SDBIF, event sponsors, or personnel, and volunteers for any injury that I may suffer from my participation in this event. I grant full permission for organizers to use photographs, videotapes, recordings, or any other record of this event in which I may appear for any legitimate reason

Signature of participant \* Signature of Parent or Legal Guardian if participant is under 18

Return this registration form to: San Diego Brain Injury Foundation • P.O. Box 84601 • San Diego, CA 92138