18 Years of celebrating brain injury recovery

San Diego 2025

Join TEAM ABI!

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

ACHIEVE MORE TOGETHER

Saturday, March 22, 2025
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 18th Annual SDBIF surviveHEADSTRONG with SDBIF celebration! We walk/roll, advocate, educate and celebrate as a team.

The surviveHEADSTRONG is your event—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 Southern Californians recovering from brain injury.

survive HEADSTRONG — Celebrating Brain Injury Recovery

2025 Team ABI Registration

Register online at www.sdbif.org/teamabi or fill out and return this registration form to SDBIF at:

P.O. Box 84601 San Diego, CA 92138

REGISTRATION FEE: *(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 22, 2025

WALKER INFO:

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 22, 2025**

Adult size: o Small o Medium o Large o X-Large o XX-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 — Date

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