

PARTICIPATION FORM FOR ABI GAMES

20 AUGUST 2025 @ UNIVERSITY OF WORCESTER ARENA

(Please complete the whole form)

NAME:

event.

EMAIL:
PHONE:
ADDRESS:
PLEASE OUTLINE A BRIEF DESCRIPTION OF YOUR INJURY/ILLNESS
(Acquired brain injury (ABI), refers to any type of brain damage that happens after birth)
Y / N Please acknowledge you are happy for us to keep your details for future events that

(Your privacy: We respect your privacy and are committed to protecting your personal data in accordance with the GDPR and applicable UK data protection laws. The personal data collected through this form will only be used for the specified purpose and will be kept secure and confidential. You have the right to access, rectify, and request the erasure of your personal data held by us. For any inquiries or requests, please contact us using the provided contact information.)

we may be running at Headway Worcestershire. If not, we will delete your details after the



CATEGORIES: (TICK ALL THAT YOU WOULD LIKE TO ENTER)

1. COGNITIVE SKILLS

- a. Chess
- b. Crib
- c. Dominoes
- d. Memory Game
- e. Sjoelbak
- f. Uno

2. CREATIVE EXPRESSION - On display and can be entered virtually

- a. Craft
- b. Creative Writing
- c. Drawing Or Painting
- d. Photography
- e. Pottery
- f. Woodwork

3. LIFE SKILLS - On display and can be entered virtually

- a. Grow Tallest Sunflower
- b. Grow Wonky Veg/Fruit
- c. Bake A Cake
- d. Bake Scones
- e. Bake A Loaf Of Bread
- f. Make A Preserve

4. PHYSICAL GAMES

- a. Boccia
- b. Bowls
- c. Walking Cricket
- d. Walking Football
- e. Walking Rugby
- f. Walking Tennis

Signed:

(Assistants name & signature if completed by someone else on your behalf)