



**2017 PARTICIPATION CONFIRMATION**

**Awards Ceremony, Monday, May 22, 2017 at Noon @ the Arlington Convention Center**



**FAX THIS FORM TO (972) 602-7182 or Email to:**

**[denabnit@careflite.org](mailto:denabnit@careflite.org)**

*Please email a photo of this Great First Responder to [denebnit@careflite.org](mailto:denebnit@careflite.org)*

Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Person \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Name of Great First Responder to be honored: \_\_\_\_\_

- EMT     
  Paramedic     
  Fire Fighter     
  Peace Officer     
  Other

Please describe why this person is being honored as a Great First Responder:

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Please send candidate information by March 20, 2017

**Questions?** Contact Doak Enabnit 806-777-1122 or [denabnit@careflite.org](mailto:denabnit@careflite.org)