

PROUD TO SERVE THOSE WHO SERVE

PEER 100 FIRST RESPONDER RETREAT NOMINATION

Please note that this request	must be submitted by an active or retired first responder	
Today's Date:	Department / Agency:	
	tion to the August 3rd Shooting: Yes No Nominee:	
	Date of Birth:	
Email Address:	Phone Number:	
Years of Service:	Active Retired	
*Please submit copy of Depar	tment Incident Report with nomination if applicable and add additional pages as needed:	

INFORMATION PROVIDED BY *Must be an active or retired El Paso County first responder* Your Name: _____ Title: _____ Department/Agency:_____ Agency Address: _____ City/St/Zip: _____ Office Phone: _____ Other: _____ Other: _____ Email: Your Signature: _____ Date: _____ Department Head/Chief Name: _____ Email: _____ Submit form by email, send to contact@borderland100club.com

Verified/Approved:
Date:
Data ID:
Payment ID:

Posted:
Date:
Check #:
Amount:

TO BE COMPLETED BY AUTHORIZED 100 CLUB PERSONNEL

Denied: Date: