

Family Emergency Plan

IMPORTANT INFO Fill in critical information.

EMERGENCY NUMBERS

Remember that the best response in an emergency is to dial 9-1-1

POLICE _____

FIRE _____

POISON CONTROL **1-800-222-1222**

DOCTOR _____

HOSPITAL _____

PHARMICIST _____

VET _____

VET ER _____

EMERGENCY PLAN

Family meeting location _____

Evacuation shelter address _____

Evacuation route _____

Pet boarding _____

Pet boarding phone _____

TV or radio station _____

Public safety website _____

ESSENTIAL INFORMATION

Medical insurance _____

Homeowner's insurance _____

Insurance agent _____

Insurance agent phone _____

FAMILY CONTACT INFO Record contact information for each family member.

Name _____

Social Security Number _____

Date of birth and age _____

Medical conditions _____

Cell phone _____

Other phone _____

Name _____

Social Security Number _____

Date of birth and age _____

Medical conditions _____

Cell phone _____

Other phone _____

Name _____

Social Security Number _____

Date of birth and age _____

Medical conditions _____

Cell phone _____

Other phone _____

Name _____

Social Security Number _____

Date of birth and age _____

Medical conditions _____

Cell phone _____

Other phone _____

EMERGENCY CONTACTS List people to be contacted in case of an emergency. Include at least one person that lives outside your area in case you are involved in a disaster and cannot communicate with someone close by.

1. Name _____

Relationship _____

Cell phone _____

Home phone _____

Other phone _____

Email _____

Address _____

City, ST zip _____

2. Name _____

Relationship _____

Cell phone _____

Home phone _____

Other phone _____

Email _____

Address _____

City, ST zip _____

3. Name _____

Relationship _____

Cell phone _____

Home phone _____

Other phone _____

Email _____

Address _____

City, ST zip _____