

ADDITIONAL IMPORTANT PHONE NUMBERS & INFORMATION:

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Write down where your family spends the most time: work, school and other places you frequent. Schools, daycare providers, workplaces and apartment buildings should all have site-specific emergency plans that you and your family need to know about.

Work Location 1:
 Address: _____
 Phone #: _____
 Evacuation Location: _____

Work Location 2:
 Address: _____
 Phone #: _____
 Evacuation Location: _____

Work Location 3:
 Address: _____
 Phone #: _____
 Evacuation Location: _____

Other Place Frequented:
 Address: _____
 Phone #: _____
 Evacuation Location: _____

Important Information:	Phone #	Policy#
Doctor(s):		
Pharmacist:		
Medical Ins:		
Homeowners/Rental Ins:		
Vet/ Kennel (for pets):		
Other:		


School Location 1:
 Address: _____
 Phone #: _____
 Evacuation Location: _____


School Location 2:
 Address: _____
 Phone #: _____
 Evacuation Location: _____

School Location 3:
 Address: _____
 Phone #: _____
 Evacuation Location: _____


Other Place Frequented:
 Address: _____
 Phone #: _____
 Evacuation Location: _____

Dial 911 for Emergencies



Ready 
 Prepare. Plan. Stay Informed.

Family Emergency Plan



Homeland Security
www.ready.gov

Through its *Ready* Campaign, the U.S. Department of Homeland Security educates and empowers Americans to take some simple steps to prepare for and respond to potential emergencies, including natural disasters and terrorist attacks. *Ready* asks individuals to do three key things: get an emergency supply kit, make a family emergency plan, and be informed about the different types of emergencies that could occur and their appropriate responses.

All Americans should have a plan in case of an emergency.

Before an emergency happens, be sure to sit down with your family and decide how you will get in contact with each other, where you will go and what you will do in an emergency. Keep a copy of this plan in your emergency supply kit or another safe place. Cut out the cards and keep them in a readily accessible place such as a wallet or backpack.



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Family Emergency Plan



Out-of-Town Contact Name: _____

Telephone #: _____

Email: _____

Neighborhood Meeting Place: _____

Telephone #: _____

Regional Meeting Place: _____

Telephone #: _____

Evacuation Location: _____

Telephone #: _____

Fill out the following information for each family member and keep it up to date.

Name: _____

Date of Birth: _____

S.S.#: _____

Important Medical Info: _____

Name: _____

Date of Birth: _____

S.S.#: _____

Important Medical Info: _____

Name: _____

Date of Birth: _____

S.S.#: _____

Important Medical Info: _____

Name: _____

Date of Birth: _____

S.S.#: _____

Important Medical Info: _____

Name: _____

Date of Birth: _____

S.S.#: _____

Important Medical Info: _____

Family Emergency Plan

EMERGENCY CONTACT NAME: _____
 TELEPHONE: _____

OUT-OF-TOWN CONTACT NAME: _____
 TELEPHONE: _____

NEIGHBORHOOD MEETING PLACE: _____
 TELEPHONE: _____

OTHER IMPORTANT INFORMATION: _____

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