

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



FEMA

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.



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: _____

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Date of Birth: _____
S.S.#: _____
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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: _____

DIAL 911 FOR EMERGENCIES

Ready





Family Emergency Plan

EMERGENCY CONTACT NAME: _____

TELEPHONE: _____

OUT-OF-TOWN CONTACT NAME: _____

TELEPHONE: _____

NEIGHBORHOOD MEETING PLACE: _____

TELEPHONE: _____

OTHER IMPORTANT INFORMATION: _____

DIAL 911 FOR EMERGENCIES

Ready





Family Emergency Plan

EMERGENCY CONTACT NAME: _____

TELEPHONE: _____

OUT-OF-TOWN CONTACT NAME: _____

TELEPHONE: _____

NEIGHBORHOOD MEETING PLACE: _____

TELEPHONE: _____

OTHER IMPORTANT INFORMATION: _____

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Family Emergency Plan

EMERGENCY CONTACT NAME: _____

TELEPHONE: _____

OUT-OF-TOWN CONTACT NAME: _____

TELEPHONE: _____

NEIGHBORHOOD MEETING PLACE: _____

TELEPHONE: _____

OTHER IMPORTANT INFORMATION: _____

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