

## Family Emergency Plan





Prepare. Plan. Stay Informed.

Make sure your family has a plan in case of an emergency. Before an emergency happens, sit down together 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 where you can access it in the event of a disaster.

Neighborhood Meeting Place:	Phone:			
Out-of-Neighborhood Meeting Place:	Phone:			
Out-of-Town Meeting Place:	Phone:			
Fill out the following information for each family memb	ber and keep it up to date.			
Name:	Social Security	Number:		
Date of Birth:	Important Med	Important Medical Information:		
Name:	Social Security	Number:		
Date of Birth:	-	ical Information:		
Name:	Social Security	Number:		
Date of Birth:	•	Important Medical Information:		
Name:	Social Security	Number:		
Date of Birth:	•	Important Medical Information:		
Name:	Social Security	Number:		
Date of Birth:	Important Med	ical Information:		
Name:	Social Security	Number:		
Date of Birth:	·	Important Medical Information:		
apartment buildings should all have site-specific emergency p Work Location One Address:	School Locati Address:			
Phone:	Phone:			
Evacuation Location:	Evacuation Loc	ation:		
Work Location Two Address:	School Locati Address:	on Two		
Phone:	Phone:			
Evacuation Location:	Evacuation Loc	ation:		
Work Location Three	School Locati	on Three		
Address:	Address:			
Phone: Evacuation Location:	Phone:  Evacuation Loc	ation:		
Other place you frequent Address:	Other place y Address:	ou frequent		
Phone:	Phone:			
Evacuation Location:	Evacuation Loc	ation:		
Name	Telephone Number	Policy Number		

Name	Telephone Number	Policy Number



## Ready Family Emergency Plan

FEMA



Prepare. Plan. Stay Informed.			117
Make sure your family has a plan in case of an eme to make sure they know who to call and where to r			per of your family
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EMERGENCY CONTACT NAME: TELEPHONE:		EMERGENCY CONTACT NAME: TELEPHONE:	
OUT-OF-TOWN CONTACT NAME:		OUT-OF-TOWN CONTACT NAME:	
TELEPHONE:  NEIGHBORHOOD MEETING PLACE:	_	TELEPHONE:  NEIGHBORHOOD MEETING PLACE:	
TELEPHONE:  OTHER IMPORTANT INFORMATION:	- I	TELEPHONE:  OTHER IMPORTANT INFORMATION:	
Ready <sub>o</sub>			Ready <sub>®</sub>
DIAL 911 FOR EMERGENCIES		DIAL 911 FOR EMERGENCIES	
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Family Emergency Plan		Family Emergency Plan	
EMERGENCY CONTACT NAME:	_	EMERGENCY CONTACT NAME:	
TELEPHONE:  OUT-OF-TOWN CONTACT NAME:		TELEPHONE: OUT-OF-TOWN CONTACT NAME:	
TELEPHONE:  NEIGHBORHOOD MEETING PLACE:	-	TELEPHONE:  NEIGHBORHOOD MEETING PLACE:	
TELEPHONE:	- 1	TELEPHONE:	
OTHER IMPORTANT INFORMATION:		OTHER IMPORTANT INFORMATION:	Ready