

T4'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.

Out-of-Town Contact Name:	Telephone Number:	
Email:		
Neighborhood Meeting Place:	Telephone Number:	
Regional Meeting Place:	Telephone Number:	
Evacuation Location:	Telephone Number:	
Fill out the following information for each family member	and keep it up to date.	
Name:	Social Security Number:	
Date of Birth:	Important Medical Information:	
Name:	Social Security Number:	
Date of Birth:	Important Medical Information:	
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Name: Date of Birth:	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 Medical Information:	
Name:	Social Security Number:	
Date of Birth:	Important Medical Information:	
Write down where your family spends the most time: work, schoapartment buildings should all have site-specific emergency plar		providers, workplaces and
Work Location One	School Location One	
Address:	Address:	
Phone Number:	Phone Number:	
Evacuation Location:	Evacuation Location:	
Work Location Two Address:	School Location Two Address:	
Phone Number:	Phone Number:	
Evacuation Location:	Evacuation Location:	
Work Location Three Address:	School Location Three Address:	
Phone Number:	Phone Number:	
Evacuation Location:	Evacuation Location:	
Other place you frequent Address:	Other place you frequent Address:	
Phone Number:	Phone Number:	
Evacuation Location:	Evacuation Location:	
Important Information	Name Telephone Number	Policy Number
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UT-OF-TOWN CONTACT NAME: !LEPHONE:	=	OUT-OF-TOWN CONTACT NAME: TELEPHONE:	
EIGHBORHOOD MEETING PLACE: ELEPHONE:	_ :	NEIGHBORHOOD MEETING PLACE: TELEPHONE:	-
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