

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 m	nember and keep it up to date.	
Name:	Social Security No	ımber:
Date of Birth:	Important Medica	
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Name: Date of Birth:	Social Security No Important Medica	
apartment buildings should all have site-specific emerge Work Location One Address:	sncy plans that you and your family nee School Location Address:	
Phone:	Phone:	
Evacuation Location:	Evacuation Locat	ion:
Work Location Two Address:	School Location Address:	Two
Phone:	Phone:	
Evacuation Location:	Evacuation Locat	ion:
Work Location Three Address:	School Location Address:	Three
Phone:	Phone:	
Evacuation Location:	Evacuation Locat	ion:
Other place you frequent Address:	Other place you Address:	frequent
Phone:	Phone:	
Evacuation Location:	Evacuation Locat	ion:
No. 10	Talanka a Nasaka	D.P. M. ober
Name	Telephone Number	Policy Number

Name	Telephone Number	Policy Number		



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UT-OF-TOWN CONTACT NAME: ELEPHONE:			OUT-OF-TOWN CONTACT NAME: TELEPHONE:	
EIGHBORHOOD MEETING PLACE:		- !	NEIGHBORHOOD MEETING PLACE:	
ELEPHONE: THER IMPORTANT INFORMATION:	— I	- 1	TELEPHONE: OTHER IMPORTANT INFORMATION:	
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