

Veterinarian/Kennel (for pets):

Ready Family Communications Plan

Your family may not be together when disaster strikes, so plan how you will contact one another and review what you will do in different situations.

Email: Telephone Number: Fill out the following information for each family member and keep it up to date. Name: Social Security Number: Important Medical Information: Where to go in an emergency. 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. Home Work Address: Address: Address: Phone Number: Phone Number: Phone Number: Evacuation Location: Regional Meeting Place: Phone Number: Evacuation Location: United School Regional Meeting Place: Regional Meeting Place: Phone Number: Evacuation Location: United School Regional Regio	Out-of-Town Contact Name:		Telephone Number:		
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Other: Pharmacist: Medical Insurance:	Doctor				
Pharmacist: Medical Insurance:					
Medical Insurance:					
HOMEOWNER / RENTAL INCURANCE	Homeowners/Rental Insurance:				



Every family member should carry a copy of this impor	tant informati	on:
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Family Communications Plan		Family Communications Plan
Contact #1 Name Telephone:	: !	Contact #1 Name Telephone:
Contact #2 Name	: !	
Telephone:	: !	Contact #2 Name Telephone:
Neighborhood Meeting Place:	: :	Neighborhood Meeting Place:
Dial 911 for Emergencies!	: :	Telephone: Dial 911 for Emergencies!
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Contact #2 Name Telephone:	! !	Contact #2 Name Telephone:
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