

FAMILY EMERGENCY COMMUNICATION PLAN



memorize our panel code and verbal alarm

password.





Fill out this plan so your family knows what to do, how to find each other, and how to communicate in an emergency. Review it every year, or whenever your info changes.

Keep a copy somewhere safe but accessible.

OUT-OF-TOWN Name: _____ CONTACT Phone: _____ This is who we will all contact to say we are OK. **Neighborhood Meeting Place:** MEETING **PLACES** This is where we will meet up away Regional Meeting Place: from home. **HOME** Security Company Name: _____ **SECURITY SYSTEM** Monitoring Center Phone: Make sure we all



WORK	Workplace:	Workplace:
	Phone:	Phone:
	Email:	Email:
SCHOOL	School:	School:
	Address:	Address:
	Phone:	
	Evacuation Location:	
FAMILY MEMBERS	Name:Phone:	
	Email:	
	Name:	Name:
	Phone:	Phone:
	Email:	Email:
	Name:	Name:
	Phone:	Phone:
	Email:	Email:



OTHER IMPORTANT NUMBERS AND INFO

Police: Dial 911 or #		
Fire: Dial 911 or #		
Poison Control: #		
Doctor: Name:	#	
Doctor: Name:	#	
Pediatrician: Name:	##	
Dentist: Name:	##	
Hospital: Name:	##	
Pharmacy: Name:	##	
Veterinarian: Name:	#	
Kennel: Name:	#	
Electric Company: Name:	##	
Water Company: Name:	#	
Gas Company: Name:	#	
Other: Name:	##	
Other: Name:	##	
Other: Name:	#	