Family emergency plan

Our household

_____

911
for police, fire or ambulance, in the US and Canada

People who live here

Name	Mobile	School, work or note

Check in with

Out-of-area contact _____
Phone _____
Email _____
Nearby contact _____
Phone _____

Text first. Keep calls short.

Where we meet

Near home _____
Outside the neighbourhood _____

Kids, school and pets

Picks up the kids _____
Looks after pets _____
School or daycare _____
Their plan _____
School or daycare _____
Their plan _____

Medical needs

_____
_____
_____
_____

Shutoffs and supplies

Water shutoff _____
Electrical panel _____
Gas meter and valve _____
Fire extinguisher _____
Kit and go bags _____
Alerts from _____

Important numbers

Doctor or clinic _____
Pharmacy _____
Vet _____
Home or tenant insurance (and policy number) _____
Power outage line _____
Gas company emergency line _____
Water utility or city _____
Police non-emergency _____
Work numbers _____
Other _____

Updated: _____. Practise it, and check it every six months.

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