



Emergencies can happen at any time! Does your family know how to get in touch with each other if you are not all together?

Family Emergency Plan

Before an emergency happens, **Take Action!** Complete the information below and discuss it with your family. Keep it in a safe place like your purse, car, at work, or in your disaster kit.

Important Information

Out-of-Town Contact

Name: _____
Home: _____
Cell: _____
Email: _____
Facebook: _____
Twitter: _____

Neighborhood Meeting Place

Out-of-Town Meeting Place

*Work Information

Workplace: _____
Address: _____
Phone: _____
Email: _____
Evacuation Location: _____

Workplace: _____
Address: _____
Phone: _____
Email: _____
Evacuation Location: _____

*School Information

School: _____
Address: _____
Phone: _____
Evacuation Location: _____

School: _____
Address: _____
Phone: _____
Evacuation Location: _____

**Follow your work/schools on social media if they have accounts.*

www.Ready.WV.gov



Important Information *(continued)*

Family Information

Name: _____

Birth Date: _____

Social Security #: _____

Important Medical Information:

Name: _____

Birth Date: _____

Social Security #: _____

Important Medical Information:

Name: _____

Birth Date: _____

Social Security #: _____

Important Medical Information:

Name: _____

Birth Date: _____

Social Security #: _____

Important Medical Information:

Medical Contacts

Doctor: _____

Phone: _____

Doctor: _____

Phone: _____

Pediatrician: _____

Phone: _____

Dentist: _____

Phone: _____

Specialist: _____

Phone: _____

Pharmacist: _____

Phone: _____

Veterinarian/Kennel: _____

Phone: _____

Insurance Information

Medical: _____

Phone: _____

Policy #: _____

Home/Rental Insurance: _____

Phone: _____

Policy #: _____