



# Family Emergency Communications Plan

Our phone number: \_\_\_\_\_

Family member	Work/school number	Cell phone number

**Friends/Neighbors/Relatives**

Name	Home phone number	Cell phone number

**Out of area contacts for our family**

Name	Address	Home & Cell phone	Email address

**Emergency meeting location**

Near home	
In our town	
Out of town	

**Other important contacts**

Contact	Name	Telephone	Policy #
Doctor/clinic			
Pharmacy			
Medical Insurance			
Hospital			
Homeowners Insurance			
Veterinarian			

### Dial 911 for Emergencies

**IMPORTANT:** include both land line telephone and cell phone numbers. In an emergency either one of these phone systems may not function.