

## EMERGENCY CONTACT INFORMATION

The address of this home: \_\_\_\_\_

The phone number of this home: \_\_\_\_\_

Emergency Phone numbers:

Police, Fire, or Ambulance: 911

Parent's location:

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell/pager: \_\_\_\_\_

Home Emergency Guide numbers and information:

Local contact:

Name: \_\_\_\_\_

Telephone: day: \_\_\_\_\_ evening: \_\_\_\_\_

Nearest Relative:

Name: \_\_\_\_\_

Telephone: day: \_\_\_\_\_ evening: \_\_\_\_\_

Family work numbers:

Father: \_\_\_\_\_

Mother: \_\_\_\_\_

Other: \_\_\_\_\_

Family Doctors/Hospital

Name: \_\_\_\_\_ phone \_\_\_\_\_

Name: \_\_\_\_\_ phone \_\_\_\_\_

Family meeting places:

1. Right outside your home: \_\_\_\_\_

2. Away from home in neighborhood

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Names and ages of children: \_\_\_\_\_

\_\_\_\_\_

Medications/allergies: \_\_\_\_\_

Location of Home emergency kit: \_\_\_\_\_