



# Family Communications Plan

*Your family may not be together when disaster strikes, so plan how you will contact one another and review what you will do in different situations.*

*Make a Plan. Make a Difference.*

Out-of-Town Contact Name \_\_\_\_\_ Phone \_\_\_\_\_  
E-mail \_\_\_\_\_ Phone \_\_\_\_\_

## Fill out the following information for each family member and keep it up to date.

Name _____	Social Security Number _____
Date of Birth _____	Important Medical Info. _____
Name _____	Social Security Number _____
Date of Birth _____	Important Medical Info. _____
Name _____	Social Security Number _____
Date of Birth _____	Important Medical Info. _____
Name _____	Social Security Number _____
Date of Birth _____	Important Medical Info. _____
Name _____	Social Security Number _____
Date of Birth _____	Important Medical Info. _____
Name _____	Social Security Number _____
Date of Birth _____	Important Medical Info. _____

**Where to go in an emergency.** Write down where your family spends the most time: work, school and other places you frequent. Schools, daycare providers, workplaces and apartment buildings should all have site-specific emergency plans.

### Home

Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Neighborhood Meeting Place \_\_\_\_\_  
Regional Meeting Place \_\_\_\_\_

### Work

Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Evacuation Location \_\_\_\_\_

### School

Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Evacuation Location \_\_\_\_\_

### Work

Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Evacuation Location \_\_\_\_\_

### School

Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Evacuation Location \_\_\_\_\_

### Other place you frequent:

Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Evacuation Location \_\_\_\_\_

### School

Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Evacuation Location \_\_\_\_\_

### Other place you frequent:

Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Evacuation Location \_\_\_\_\_

Make a note of important contacts, phone numbers and policy numbers. Dial 9-1-1 for emergencies!

Important Information	Name	Telephone #	Policy #
Doctor			
Doctor			
Pharmacist			
Medical Insurance			
Homeowner's/Rental Insurance			
Veterinarian/Kennel			
Other			
Other			
Other			

Every family member should carry a copy of this important information.

1-800-639-READY (7323)



**READYColorado**

*Make a Plan. Make a Difference.*

www.readycolorado.com

---

Meeting Place Telephone:

---

Neighborhood Meeting Place:

---

Telephone:

---

Out-of-Town Contact Name:

---

Telephone:

---

Contact Name:

---

**COMMUNICATIONS PLAN**

1-800-639-READY (7323)



**READYColorado**

*Haga un Plan. Haga una Diferencia.*

www.readycolorado.com

---

Teléfono del lugar de reunión:

---

Lugar de reunión del vecindario:

---

Teléfono:

---

Nombre de la persona con quien ponerse en contacto fuera de la ciudad:

---

Teléfono:

---

Nombre de las personas con quien ponerse en contacto:

---

**PLAN DE COMUNICACIONES**