



My Family Disaster Plan

IMPORTANT HOUSEHOLD INFORMATION:

Home address: _____

Home phone: _____

FAMILY MEMBER INFORMATION:

Name: _____ Cell #: _____ Work/School #: _____

Email address: _____ Social Security Number: _____

Name: _____ Cell #: _____ Work/School #: _____

Email address: _____ Social Security Number: _____

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Email address: _____ Social Security Number: _____

Name: _____ Cell #: _____ Work/School #: _____

Email address: _____ Social Security Number: _____

Name: _____ Cell #: _____ Work/School #: _____

Email address: _____ Social Security Number: _____

PET(S) INFORMATION:

Name: _____ Physical Description: _____

Registration #: _____

Name: _____ Physical Description: _____

Registration #: _____

Name: _____ Physical Description: _____

Registration #: _____



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FAMILY ADDITIONAL INFORMATION:

Doctor: _____ Office #: _____

Doctor: _____ Office #: _____

Veterinarian: _____ Office #: _____

Pharmacy: _____ Office #: _____

Other: _____

FAMILY MEETING LOCATIONS:

1. Before or after an emergency or disaster event, my family will meet at one of these central locations:

⇒ Primary — Neighborhood location: _____ Phone #: _____

⇒ Secondary — Regional location: _____ Phone #: _____

2. If at school/daycare, the child(ren) will be at or evacuated to:

⇒ Child: _____ Site: _____ Contact: _____

⇒ Child: _____ Site: _____ Contact: _____

⇒ Child: _____ Site: _____ Contact: _____

⇒ Child: _____ Site: _____ Contact: _____

3. If asked to “shelter in place” in our home, our safest central room is: _____



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CENTRAL POINTS OF CONTACT:

Should family members become separated or lost, they should contact one of these numbers to check in and receive potential updates on other members of the household.

Contact: _____ Relationship: _____

Phone #: _____

Out-of-town Contact: _____ Relationship: _____

Phone #: _____

OTHER CONSIDERATIONS:

1. If my household has special needs individuals, here is how we will meet personal and safety needs:

2. If our household must evacuate to a non-pet shelter, our pets will go to:

Name: _____ Location: _____ Phone: _____



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You and your family will need to be ready to move while gathering necessary materials and information. Assigning responsibilities to each family member can help to ensure that everything gets done timely and with little confusion. Use the following chart to assist in assigning key roles. You can also add other roles that are specific to your household.

PREPARATION TASK LIST:

TASK	DESCRIPTION	RESPONSIBILITY OF
Event updates	Keep up with current and/or potential emergency or disaster events and update household as needed.	
Disaster plan updates and distribution	Maintain the updates, distribution, and communication of the family disaster preparedness document.	
Record keeping	File, organize, update, and ensure safe keeping and carrying of all important household documentation in event of a disaster (e.g. birth certificates, social security cards, titles, bank statements, insurance information, bills, etc.).	
Pets	Ensures all pets are accounted for and evacuated properly. Also, will maintain and carry pet documentation, food and medical necessities during event.	
Disaster supply kit	Make sure disaster supply kit is always stocked and in designated location. Will grab and maintain kit during event.	
Transportation	Maintains and operates evacuation vehicle (vehicle checks, gas, etc.).	

Other Important Phone Numbers and Information:

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Phone #: _____
Out-of-town Contact: _____
Phone #: _____
Neighborhood location: _____
Phone #: _____

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