

CREATE YOUR PLAN

You or other members of your family may not be at home if a disaster strikes suddenly. To keep everyone in touch, create an emergency plan for your family.

This card could be the most important card that you carry! Having important names and phone numbers on hand may save valuable time and energy during a disaster. Use this card to note important emergency contacts such as:

1. Pick a family member or friend that household members will contact to notify they are safe.
2. Decide on a place in your neighborhood to meet if you need to leave your house quickly. It could be a park, tree, or a street sign.
3. In addition, choose an easy-to-find meeting place in your community, but outside of your neighborhood.



FAMILY EMERGENCY PLAN POCKET PAL



Oliver Ostrich is the Emergency Preparedness mascot for the City of Chino. Join Oliver in making Chino an even better place to live, work, and play by pledging to be part of the Chino Cares movement.

Visit www.cityofchino.org/chinocares for more information.



Oliver's Preparedness Tip:

Make sure everyone in your family has a copy of the emergency plan. Talk about the plan with your family and make sure the contacts are updated at least annually!

FAMILY EMERGENCY PLAN

MEETING PLACES

In Neighborhood: _____

Outside of Neighborhood: _____

OUT-OF-AREA CONTACT

Name: _____

Phone: _____

Email Address: _____

OTHER IMPORTANT PHONE NUMBERS

Name: _____

Contact: _____

Relation: _____

Name: _____

Contact: _____

Relation: _____

Name: _____

Contact: _____

Relation: _____

Name: _____

Contact: _____

Relation: _____

Name: _____

Contact: _____

Relation: _____

Name: _____

Contact: _____

Relation: _____

Name: _____

Contact: _____

Relation: _____

Name: _____

Contact: _____

Relation: _____

Option 1:

Print on 8.5" x 11" paper. Cut along dotted lines and fold in half along the solid line. Fold document in half and then half again so that it about the size of a credit card and can fit easily inside your wallet.



Write your family's name above
EMERGENCY PLAN

KEEP IN CASE OF EMERGENCY

HOUSEHOLD INFORMATION

Name: _____ DOB: _____ Sex: _____

Phone: _____

Identifying Characteristics: _____

Work/School: _____ Address: _____

Work/School Phone: _____

Name: _____ DOB: _____ Sex: _____

Phone: _____

Identifying Characteristics: _____

Work/School: _____ Address: _____

Work/School Phone: _____

HOUSEHOLD INFORMATION

Name: _____ DOB: _____ Sex: _____

Phone: _____

Identifying Characteristics: _____

Work/School: _____ Address: _____

Work/School Phone: _____

Name: _____ DOB: _____ Sex: _____

Phone: _____

Identifying Characteristics: _____

Work/School: _____ Address: _____

Work/School Phone: _____

HOUSEHOLD INFORMATION

Name: _____ DOB: _____ Sex: _____

Phone: _____

Identifying Characteristics: _____

Work/School: _____ Address: _____

Work/School Phone: _____

Name: _____ DOB: _____ Sex: _____

Phone: _____

Identifying Characteristics: _____

Work/School: _____ Address: _____

Work/School Phone: _____

MEETING PLACES

Name: _____ Neighborhood

Address: _____ Phone: _____

Point of Contact/Special Instructions: _____

Name: _____ Out of Neighborhood

Address: _____ Phone: _____

Point of Contact/Special Instructions: _____

Name: _____ Out of Town

Address: _____ Phone: _____

Point of Contact/Special Instructions: _____

IN CASE OF EMERGENCY CONTACT

Name: _____ Mobile #: _____

Home #: _____ Email: _____

Address: _____

OUT-OF-TOWN CONTACT

Name: _____ Mobile #: _____

Home #: _____ Email: _____

Address: _____

IMPORTANT PHONE NUMBERS

Police: _____ Dial 911 or #: _____

Fire: _____ Dial 911 or #: _____

Poison Control: _____ #: _____

Doctor: _____ #: _____

Pediatrician: _____ #: _____

Dentist: _____ #: _____

Medical Insurance: _____ #: _____

Policy #: _____

Hospital/Clinic: _____ #: _____

IMPORTANT PHONE NUMBERS

Pharmacy: _____ #: _____

Homeowners/Renters Insurance: _____ #: _____

Policy #: _____

Flood Insurance: _____ #: _____

Policy #: _____

Earthquake Insurance: _____ #: _____

Policy #: _____

Alternate/Accessible Transportation: _____

_____ #: _____

IMPORTANT PHONE NUMBERS

Electric Company: _____ #: _____

Gas Company: _____ #: _____

Water Company: _____ #: _____

Other: _____ #: _____

Other: _____ #: _____

PETS

Name: _____ Type: _____

Name: _____ Type: _____

Name: _____ Type: _____

Veterinarian: _____ #: _____

Address: _____

Kennel: _____ #: _____

Address: _____

Option 2:

Print on 8.5" x 11" paper. Cut along dotted lines and fold along the solid line in the middle. Fold accordion style so that it is about the size of a credit card and can easily fit inside your wallet