



# Family Emergency Communication Plan

## Household Information

Home Phone #:

Home Address:

## Family Members

Name:

Name:

Cell Phone #:

Cell Phone #:

Email:

Email:

Medications/Medical History/Allergies/Other Info:

Medications/Medical History/Allergies/Other Info:

Name:

Name:

Cell Phone #:

Cell Phone #:

Email:

Email:

Medications/Medical History/Allergies/Other Info:

Medications/Medical History/Allergies/Other Info:

Name:

Name:

Cell Phone #:

Cell Phone #:

Email:

Email:

Medications/Medical History/Allergies/Other Info:

Medications/Medical History/Allergies/Other Info:

## Emergency Contacts

Name:	Name:
Cell Phone #:	Cell Phone#:
Home Phone #: (if applicable)	Home Phone #: (if applicable)
Email:	Email:
Address:	Address:

## Medical Information / Contacts

Doctor Name:	Doctor Name:
Doctor Phone #:	Doctor Phone #:
Pediatrician Name:	Veterinarian Name:
Pediatrician Phone #:	Veterinarian Phone #:
Pharmacy Name:	<u>Other</u> Name:
Pharmacy Phone #:	<u>Other</u> Phone #:



Poison Control: 1 - 800 - 222 - 1222

## Emergency Meeting Places

Primary Location:

Instructions:

Secondary Location:

Instructions:

**Helpful Hint:** Once complete, take picture with your cell phone for safekeeping also.



Northampton County Emergency Management  
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