



3Days 3Ways

Planning worksheets

<p> American Red Cross Serving King & Kitsap Counties</p> <p>Name: _____</p> <p>Home Address: _____</p>	<p>Emergency Contact Card</p> <p>Important Phone Numbers</p>	<p>Police: call 9-1-1 or _____</p> <p>Fire: call 9-1-1 or _____</p> <p>Ambulance: call 9-1-1 or _____</p> <p>Family Doctor: _____</p> <p>Poison Control Center: 1-800-222-1222</p> <p>Visit: www.seattleredcross.org</p>
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**Household Member's
Contact Information**

Out-of-town contact:

Family meeting place outside the neighborhood:



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Live Prepared

Talk. Discuss the disasters that can happen where you live with your household. Establish responsibilities for each member of your household and plan to work together as a team.

Designate alternates in case someone is absent. If a family member is in the military, also plan for how you would respond if they are deployed. Include the local military base resources that may be available.

Plan. Choose two places to meet after a disaster:

- Right outside your home, in case of a sudden emergency, such as a fire.
- Outside your neighborhood, in case you cannot return home or are asked to evacuate your neighborhood.

Assess. Each adult in your household should learn how and when to turn off utilities such as electricity, water and gas. Ask your local fire department to show you how to use a fire extinguisher.

Learn what disasters or emergencies may occur where you live, work and play. These events can vary from those

affecting only you and your family, like a home fire or medical emergency, to those affecting your entire community, like an earthquake or flood.

Identify how local authorities will notify you during a disaster and how you will get important information, whether through local radio, TV or NOAA weather radio stations or channels.

Tell everyone in the household where emergency information and supplies are kept. Make copies of the information for everyone to carry with them. Keep the information updated.

Practice evacuating your home twice a year.

Drive your planned evacuation route and plot alternate routes on a map in case main roads are impassable or gridlocked.

Include your pets. If you must evacuate, take your animals with you. If it is not safe for you to remain, it is not safe for them.

Support your community plans by volunteering in the community. More than one million people in the U.S. serve their communities.

Household emergency preparedness worksheet

Name: _____

In the event of a major disaster, all household members will meet at:

Location: _____

Any household member leaving the meeting place before others will leave a message at:

Name: _____

Home phone: _____ cell phone: _____

Location: _____

Email address, if applicable: _____

If there is a serious medical problem, we will first try to go to:

Name of hospital: _____

Address: _____

If we are unable to go to the hospital, we will try:

Alternate hospital: _____

Address: _____

We will leave phone messages, at this out-of-the-area number

Name: _____

Home phone: _____ cell phone: _____

Email address: _____

The nearest fire station is at

Location: _____

Workplace and/or school policy for emergency preparedness:

Name: _____

Plan description: _____

Name: _____

Plan description: _____

Disaster Supplies:

Start with what you have and slowly add over time

- Three-day supply of water (one gallon per person, per day).
- Three-day supply of nonperishable food (pouches, cans, etc).
- Manual can opener.
- Prescription medications: three-day supply.
- List of medications, Doctor & pharmacist contact information
- Blanket
- Flashlight with extra batteries (do not use candles)
- First-aid kit and manual.
- Sanitation and hygiene items (toilet paper, feminine products).
- Matches in waterproof container.
- Whistle (to attract attention).
- One change of clothing.
- Photocopies of identification and credit cards.
- Cash and coins (ATMs may not be accessible).
- Eye glasses, contact lens solution.
- Items for infants, such as formula, diapers, bottles, and pacifiers.
- Pet supplies (including food and vaccination record).
- Map of the local area.
- Pack of cards, book.
- Extra set of keys (car, house, etc).
- Plastic garbage bags.
- Family & friends emergency contact information.

Fill out this card with the help of your health care provider.

About You:

Name: _____

Phone: _____

Address _____

Birth date: _____

Blood Type: _____

Preferred Language for

communication:

(Including ASL)

Best way to communicate

Speak slowly and clearly

Write in block letters

Use Pictograms

Please contact: for help

communicating.

Allergies (medicine, food

or other) _____

Medical condition

(such as asthma diabetes, heart condition, high blood pressure, lung problems, kidney disease)

In an Emergency:

Follow your emergency plan and instructions from local officials. Officials should have proper identification.

Emergency information

may be provided via local radio stations, such as AM 1,000, by email, text or on the internet by registering at RPIN.org, or in languages other than English by calling 211 and requesting interpreting. TTY

I use adaptive

equipment for:

(hearing, speaking, seeing, moving)

Specialized Equipment,

Supplies or other

needs: (such as

oxygen, CPAP devise)

Keep this information

with you and use it to

help communicate with

emergency responders

to ensure you maintain

access to health needs.