





Electricity lights up our world!

Think of all the ways we rely on electricity: keeping food fresh, cooking meals, and getting information through the internet or TV. It keeps us warm in the winter, cool in the summer, and connected with each other year round. Oftentimes, we use electricity to play and have fun! Are you and your family ready if disaster strikes and your home is without power?

How would we see at night without power?

Help your family build an emergency kit! Collect these items and keep them together in a safe place that you can find easily. Make sure you have enough supplies to last for at least **three days**.

Emergency Supplies List

| Linei geney 3 | applies List |
|--|--|
| 3-day supply of non-perishable food (dried fruit, canned tuna fish, peanut butter, etc.) | □ Water – at least a gallon per person, per day□ Battery-powered or hand-cranked radio with |
| ☐ Can opener | extra batteries |
| ☐ First aid kit | ☐ Flashlights with extra batteries |
| Sleeping bag or warm blanket for everyone in your family | Cell phone with charger, extra battery and solar charger |
| Change of clothes to last 3 days, including sturdy shoes; consider the weather where you live | ☐ Whistle to signal for help ☐ Local maps ☐ Color (1997) |
| Matches in a waterproof container (let a grown up handle these) | Pet supplies Baby supplies traffic lights will not work! |
| Toothbrush, toothpaste, soapPaper plates, plastic cups and utensils, paper towels | ☐ Books, games or puzzles ☐ A favorite stuffed animal or blanket |

Go on a quest with your family!

Create a scavenger hunt!

Make planning fun!



http://www.ready.gov/kids



Home:



Family Communication Plan

Emergencies can happen at any time. Does your family know how to get in touch with each other if you are not all together?

Before an emergency happens, have a family discussion to determine who would be your out-of-state point of contact, and where you would meet away from your home — both in the neighborhood and within your town.

Out-of-Town Contact

you're OK!

Pick the same person for each family member to contact. It might be easier to reach someone who's out of town.

Important Information

Fill in this information and keep a copy in a safe place, such as your purse or briefcase, your car, your office, and your disaster kit. Be sure to look it over every year and keep it up to date.

| Email: |
|----------------------|
| Facebook: |
| Twitter: |
| |
| Work Information |
| Workplace: |
| Address: |
| Phone: |
| Facebook: |
| Twitter: |
| Evacuation Location: |
| Workplace: |
| Address: |
| Phone: |
| Facebook: |
| Twitter: |
| Evacuation Location: |
| |

| Neighborhood Meeting Place: |
|-----------------------------|
| Regional Meeting Place: |
| Regional Meeting Flace. |
| |

| School Information |
|----------------------|
| School: |
| Address: |
| Phone: |
| Facebook: |
| Twitter: |
| Evacuation Location: |
| School: |
| Address: |
| Phone: |
| Facebook: |
| Twitter: |
| Evacuation Location: |
| School: |
| Address: |
| Phone: |
| Facebook: |
| Twitter: |
| Evacuation Location: |





Important Information (continued)

Family Information Name: ______ Date of Birth: _____ Social Security Number: Important Medical Information: _____ Name: ______ Date of Birth: _____ Social Security Number: ___ Important Medical Information: _____ Name: _____ Date of Birth: _____ Social Security Number: _____ Important Medical Information: _____ Name: ______ Date of Birth: _____ Social Security Number: Important Medical Information: _____ Name: _____ Date of Birth: _____ Social Security Number: ____ Important Medical Information: _____ Name: ______ Date of Birth: _____ Social Security Number: ____ Important Medical Information:

| | Medical Contacts |
|---|------------------------------|
| | Doctor: |
| • | Phone: |
| ı | Doctor: |
| | Phone: |
| | Pediatrician: |
| ı | Phone: |
| | Dentist: |
| | Phone: |
| ı | Dentist: |
| | Phone: |
| | Specialist: |
| ı | Phone: |
| ı | Specialist: |
| ı | Phone: |
| | Pharmacist: |
| | Phone: |
| | Veterinarian/Kennel: |
| | Phone: |
| | |
| | Insurance Information |
| ı | Medical Insurance: |
| ı | Phone: Policy Number: |
| | |
| | Homeowners/Rental Insurance: |
| | Phone: |
| | Policy Number: |

Text, don't talk!

Unless you are in danger, send a text. Texts may have an easier time getting through than phone calls, and you don't want to tie up phone lines needed by emergency workers.

