

# Personal Record of Important Information

**Family Information:** (identify all family members)

Adults: \_\_\_\_\_

Children: \_\_\_\_\_

Pets: \_\_\_\_\_

(id kind of pet) \_\_\_\_\_

Address (for 9-1-1) purposes: \_\_\_\_\_

Phone No.: \_\_\_\_\_

**Local Contact:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

**Nearest Relative:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

**Family work numbers:** 1. \_\_\_\_\_

2. \_\_\_\_\_

**Family cell phone/pager numbers:** 1. \_\_\_\_\_

2. \_\_\_\_\_

**Family out-of-area contact:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

**Children's School(s) / Day Care Provider:**

\_\_\_\_\_

**Hospital:** \_\_\_\_\_

**Family Doctor:** \_\_\_\_\_

**Emergency Reunion Locations:**

1. Outside your home:

2. Away from the neighbourhood, in case you can not return home, meet at:

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

3. Travel route to try first: \_\_\_\_\_

\_\_\_\_\_

For emergency information listen to the local radio and television stations or check internet sites.

Our emergency radio is located: \_\_\_\_\_

Extra batteries are located: \_\_\_\_\_

Flashlight/candles/matches are located: \_\_\_\_\_

Our emergency survival kit is located: \_\_\_\_\_

Shut-off switches for heating & ventilating equipment and utilities are marked with an  
and are located:

Gas: \_\_\_\_\_

Provider: \_\_\_\_\_

Water: \_\_\_\_\_

Electricity: \_\_\_\_\_

Provider: \_\_\_\_\_

Other: \_\_\_\_\_

**Caution:**

If you turn off the gas, it should only be turned back on by a professional from the gas company.

Our emergency heat source is: \_\_\_\_\_

Our insurance company is: \_\_\_\_\_

Policy No.: \_\_\_\_\_ Insurance Agent: \_\_\_\_\_