|  |
| --- |
| **Local contact** |
| Name |
| Phone |
| Alternate Phone |

|  |
| --- |
| **Out of State Contact** |
| Name |
| Phone |
| Alternate Phone |

|  |
| --- |
| **next of kin** |
| Name |
| Phone |
| Alternate Phone |

|  |
| --- |
| **physician name** |
| Name |
| Phone |
| Alternate Phone |

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| --- |
| **emergency services** |
| Police/Ambulance: 911 |
| Fire Department: |
| Poison Control: |

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| --- |
| **School Contact**  |
| Name |
| Phone |
| Alternate Phone |

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| --- |
| **work contact** |
| Name |
| Phone |
| Alternate Phone |

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| --- |
| **Neighbor/Lanlord/****Homewoner Association** |
| Name |
| Phone |
| Alternate Phone |

|  |
| --- |
| **Local services** |
| Gas Company: |
| Electric Company: |
| Water Company: |

|  |
| --- |
| **Family Contractor**  |
| Name |
| Phone |
| Alternate Phone |

EMERGENCY CONTACT LIST