



## My Safety Plan In Case of an Emergency

**ALWAYS CALL 911 FIRST IF NEEDED** and give responders a copy of this plan.

Date of Plan \_\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Other people living in my home \_\_\_\_\_

Type and names of my pets and where they live \_\_\_\_\_

\_\_\_\_\_

### SUPPORT CONTACTS IN CASE OF AN EMERGENCY

Name / relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Out of Town Contact \_\_\_\_\_ Phone # \_\_\_\_\_

My Neighbor \_\_\_\_\_ Phone # \_\_\_\_\_

My Church Contact \_\_\_\_\_ Phone # \_\_\_\_\_

Local Contact With House Key \_\_\_\_\_ Phone # \_\_\_\_\_

Neighborhood Emergency Preparedness Group \_\_\_\_\_ Phone # \_\_\_\_\_

### ABOUT MY HEALTH

My health care provider \_\_\_\_\_ Phone # \_\_\_\_\_

My health problems (medical diagnoses) \_\_\_\_\_

\_\_\_\_\_

I am allergic to this medication or food \_\_\_\_\_

The pharmacy I use for prescriptions \_\_\_\_\_

Medication \_\_\_\_\_ Dose/WhenTaken \_\_\_\_\_

Medication \_\_\_\_\_ Dose/WhenTaken \_\_\_\_\_

Medication \_\_\_\_\_ Dose/WhenTaken \_\_\_\_\_

Medication \_\_\_\_\_ Dose/WhenTaken \_\_\_\_\_

Medication \_\_\_\_\_ Dose/WhenTaken \_\_\_\_\_

I wear:  Glasses --  Contacts --  Hearing Aid --  Dentures --  Other \_\_\_\_\_

I have a:  Pacemaker/type \_\_\_\_\_  Defibrillator/type \_\_\_\_\_

I have a Living Will. A copy can be found \_\_\_\_\_

More things to know about me/Specific Instructions \_\_\_\_\_

\_\_\_\_\_






\_\_\_\_\_



For information about joining or creating a  
**Neighborhood Emergency Preparedness Group**  
 Please call (360) 385-9368  
 Or send an email to [jcdem@co.jefferson.wa.us](mailto:jcdem@co.jefferson.wa.us)

**CALL 211 FOR NON EMERGENCY/SOCIAL SERVICE INFORMATION:**

**Things to do and think about to prepare for an emergency:**

1. **IMPORTANT:** Fill out a “My Personal Safety Plan” form. You can ask a health care provider or other trusted person to help you fill it out. It’s a good idea to give copies to your family and your children that live out of town, and to a trusted friend and neighbor. You could also keep a copy on your refrigerator, in your purse or wallet, in your car and in your “Grab and Go” emergency backpack.
2. Plan and practice an escape route from every room in your house in case of fire.
3. Pick a meeting place nearby where you would go in an emergency if you had to leave your house. Tell the other people that live in your house and your neighbors where you plan to meet.
4. If you couldn't reach the phone, how long would it take before someone came looking for you? Would they be able to get in? 
5. Arrange for one or two people to be your helpers in case of an emergency. These people should live with you or nearby. Do they have a key to your home? Are they part of your Neighborhood Group? 
6. Have flashlights ready to find your way in the dark, and keep a flashlight near your bed.  
7. Keep a pair of sturdy shoes and leather gloves under your bed that you can put on quickly in case of an emergency at night.
8. Know where your important legal documents are kept. In case of an emergency, someone you trust should also know where they are. 

**ALWAYS CALL 911 IN CASE OF EMERGENCY :**

**For information or help when it is NOT an emergency**

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| <ul style="list-style-type: none"> <li>• Jefferson County Sheriff 385-3831</li> <li>• Port Townsend Police Department - 385-2322</li> <li>• Jefferson County Animal Services 385-3292</li> <li>• Senior Information &amp; Assistance 385-2552</li> <li>• Olympic Community Action 385-2571</li> </ul> | <ul style="list-style-type: none"> <li>• East Jefferson Fire &amp; Rescue 385-2626</li> <li>• Quilcene Fire Department 765-3333</li> <li>• Port Ludlow Fire Department 437-2236</li> <li>• Brinnon Fire Department 796-4450</li> <li>• Discovery Bay/Gardiner/Fire Depart 797-7711</li> <li>• Red Cross 385-2737</li> </ul> |
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