

# PLAN



**NAME** \_\_\_\_\_

Provincial health card number \_\_\_\_\_

Passport number / permanent resident card /  
status card / other important document numbers \_\_\_\_\_

Driver's licence number \_\_\_\_\_

Cell phone number \_\_\_\_\_

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NAME

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| <b>NAME</b> |  |
| Phone       |  |
| Address     |  |

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| <b>NAME</b> |  |
| Phone       |  |
| Address     |  |

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| <b>NAME</b> |  |
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| <b>NAME</b> |  |
| Phone       |  |
| Address     |  |

|             |  |
|-------------|--|
| <b>NAME</b> |  |
| Phone       |  |
| Address     |  |

Note:





|                              | NAME | PHONE | OUT OF HOURS CONTACT | ADDRESS |
|------------------------------|------|-------|----------------------|---------|
| Doctor                       |      |       |                      |         |
| Nearest emergency department |      |       |                      |         |
| Pharmacy                     |      |       |                      |         |
| Optometrist                  |      |       |                      |         |
| Dentist                      |      |       |                      |         |
| Poison control               |      |       |                      |         |
| Other                        |      |       |                      |         |

**For each household member, you are encouraged to:**

Attach copies of health cards to this plan.

Attach copies of third-party, private or other supplementary health insurance cards to this plan (such as insurance through your employer).

Attach copies of prescriptions to this plan.

Include a three-day supply of all medications in your kit, or at least have such supplies in a safe location within your home that you are prepared to grab and leave your home with as needed.

**Note:** Consider all medical conditions of all household members, and any additional needs they may have (e.g. wheelchair, crutches, oxygen, etc.). Have a plan for how you will manage during and after an emergency.

|   |  |
|---|--|
| Medications and dosages   |  |
| Condition   |  |
| Allergies   |  |
| Blood Type  |  |
| Medical aids<br>(e.g. wheelchair, crutches)<br>Include: brand, model<br>and serial numbers                  |  |
| Plan to manage in case<br>of emergency (including<br>additional sources of power,<br>extra batteries, etc.) |  |
| Additional Details  |  |

**Note:** Please print additional copies of this page as needed to include all members of your household.



|                         | COMPANY | ACCOUNT NUMBER | CONTACT DETAILS |
|-------------------------|---------|----------------|-----------------|
| Electricity/oil/propane |         |                |                 |
| Gas                     |         |                |                 |
| Water                   |         |                |                 |
| Roadside assistance     |         |                |                 |
| Internet                |         |                |                 |
| Phone                   |         |                |                 |
| Septic service provider |         |                |                 |
| Other                   |         |                |                 |





|                                   |  |  |
|-----------------------------------|--|--|
| Garage door manual override       |  |  |
| Gas                               |  |  |
| Other utilities                   |  |  |
| Location sn20(NCE ITA)4Ty ndcr)24 |  |  |
|                                   |  |  |



|  | INSURER | CONTACT DETAILS | POLICY NUMBER |
|--|---------|-----------------|---------------|
| Home   |         |                 |               |
| Third-party / private health insurance coverage /supplementary insurance |         |                 |               |
| Car  |         |                 |               |
| Life   |         |                 |               |
| Travel   |         |                 |               |

**Note:** Visit [redcross.ca/ready](http://redcross.ca/ready) for links to additional insurance information to help you before, during and after an emergency. Make sure you understand what your insurance coverage includes.













## IMPORTANT REMINDER

Review, update and practice your emergency plan as a household frequently (at least yearly).

Test your smoke alarms and CO2 detectors every six months.

## FIRST AID TRAINING

Consider becoming trained in first aid and CPR.

See [www.redcross.ca](#) and download the Canadian Red Cross First Aid app on your smartphone



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**DO YOU HAVE AN EMERGENCY KIT?**

To help make sure you are ready for emergencies, you should have an emergency preparedness kit in your home with enough supplies to meet the needs of your entire household for at least 3 days. Some disasters, such as floods, wildfires and major power outages, can create unsafe conditions. If your safety is at risk, community officials may ask you to either take shelter at home or evacuate to a safer place. If asked to evacuate, you may have only minutes to get what you need and leave. Having an emergency kit that you can either use at home or grab and take along will help you be prepared and get to the evacuation point quickly, if needed.



## EMERGENCY KIT CHECKLIST

- Drinking water: 1L per person per day for at least 3 days, (2L if including pets)
- Water for cleaning and hygiene: 2L per person/per day

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- Food (non-perishable, doesn't require preparation), including cans, energy bars, etc.

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- Manual can opener (if you included canned food items) and utensils

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- Items you cannot be without, such as medications (with copies of your prescriptions), extra eye glasses or contacts, baby supplies (diapers, formula, food, toys), hearing aids, dentures, diabetic supplies, walkers, pet foods and medications, etc., to last at least 3 days.

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- Copies of important documents (e.g. birth and marriage certificates, passports, permanent resident cards, status cards or any such important documents, health cards, licences, wills, land deeds, insurance)\*

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- Crank or battery-operated flashlight, with extra batteries
- Crank or battery-operated radio, with extra batteries
- Extra keys for your house and car
- First aid kit
- Extra cash in small bills and coins
- Personal hygiene items
- Extra cell phone charger or battery pack
- Supplies for your pet (e.g. food, medication, vaccination records)
- Paper and pens
- Whistle
- Copy of this emergency plan (see [redcross.ca/ready](http://redcross.ca/ready) for more information and to download a template)

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\* In addition to having paper copies of important documents in a safe location (consider a safe location other than your home), you may also want to consider saving electronic copies or photos of important documents in a safe location (such as an encrypted USB, or other secure device) or leaving with a trusted contact

## ADDITIONAL ITEMS TO CONSIDER

- Traditional medicines and/or ceremonial items that you use or want to have with you
- Traditional foods that may be difficult to find in stores
- Change of clothing and footwear for each person in your household
- Plastic sheeting
- Scissors and a pocket knife (not if evacuating by air or into a centre/shelter)
- Hand sanitizer
- Garbage bags and twist ties
- Toilet paper
- Multitool or basic tools (i.e. hammer, wrench, screwdriver, etc.)
- Duct tape
- Sleeping bag or warm blanket for each member of your household
- Toys, games, books, deck of cards
- Paper map

### Other important notes: