Emergency Action Plan

Emergency Action Plan (EAP) for (_______program) 1. Who is in charge? _____ 2. Who is the "call person"? a. Backup? _____ 3. Where is the nearest public phone located? Who is responsible for carrying a cell phone? _____ Back up? 4. Emergency Numbers for site? a. Ambulance? b. Fire? _____ c. Police?____ d. Hospital?_____ e. Facility Manager? _____ f. Other? (_____)___ 5. Are athlete medicals on site? _____ a. Where? ____ b. Access available to _____ 6. First –Aid kit on site? a. Where? _____ b. Who has access? _____ 7. Directions for Emergency Vehicles/ Personnel Address of the facility: a. Closest major intersection /building/ landmark? ______ 8. Safety area in case of evacuation? Muster Station b. Backup? ______