



Emergency Checklist

Please fill this in together and keep it where everyone can see it – for example on the fridge or next to the phone.

General

- Parents' names

Family name: _____

Children: _____

- Home address

Address: _____

Phone: _____

- When should the parents be contacted?

- Where and how can the parents be reached?

Address: _____

Phone: _____

Back at: _____

- Contact persons

Name: _____

Address: _____

Phone: _____

Name: _____

Address: _____

Phone: _____

Home & access

- Where is the house key?

Location: _____

- Where is the fuse box?

Location: _____

- Where are the gas tap, water stopcock and the RCD switch?

Location: _____

Outside & on the move

- Meeting point outside the house

- Nearest pharmacy on duty

Name: _____

Phone: _____

- Neighbour / caretaker

Name: _____

Phone: _____

In an emergency

Emergency (ambulance & fire) **112**

Poison control Munich **+49 89 19240**

- First-aid kit

Location: _____

- Fire extinguisher

Location: _____

- Hospital

Name: _____

Phone: _____

A&E: _____

- Paediatrician

Name: _____

Phone: _____

The child / children

- Allergies, medical conditions

- Medication, dosage, times

- Likes and dislikes (food, toys ...)

- Bedtimes

- Other notes
