

Emergency Plan

1. Medical Release Form

Filled out for every participant

2. Access to a phone

911 Emergency Call Sheet filled out and posted by the phone

3. Assignments

Director stays with injured person - Remain calm and confident
Designated person calls 911 - State name, type of emergency, specific location
Designated person call parents - State name, injury, name of hospital
Designated person waits for the ambulance and directs it to the proper area
Designated person (if any) rides in the ambulance with the injured person
Director fills out an accident report

4. Practice Emergency Plan

Determine placement of nearest phone
Determine who will call 911
Determine who will contact parents
Determine who will meet the ambulance
Determine who will ride in the ambulance

911 EMERGENCY CALL

Hello, this is _____. I am calling because one of our team members _____ (state injury).

We are located at _____ (school name) at _____ (school address).

We need an ambulance at _____ (location in school and directions).

We will have someone outside to meet you.

POLICE DEPARTMENT PHONE NUMBER _____

FIRE DEPARTMENT PHONE NUMBER _____

ATHLETIC DIRECTOR PHONE NUMBER _____



NOTES:

