APPENDIX A-1: Sample Parent Letter

DATE:

Dear Child Care Parents:

Attached please find a copy of our "Crisis/Disaster Plan." With the implementation of this Plan, you can rest assured we will do everything we can to protect your child in the event of a crisis or disaster.

With any disaster or crisis, your cooperation is necessary for the following:

- Encourage and explain to your child why the best place for them is at the child care center.
- Explain that if you are unable to pick them up quickly, the child care staff will care for them until you or your emergency contact comes to get them.
- Please do not telephone the child care center. Telephone lines will be needed for emergency communications for the first 4 hours.
- Provide an emergency/comfort kit for your child.
- Include an out-of-state contact number with your kit.
- Provide a 72-hour supply of any medication or medical supplies/equipment that your child may need.

The child care staff will care for your child until you or your designee are able to reach him/her. Be sure to keep your child's emergency release card updated. Your child will be released only to those specified by you on his/her card. We will also utilize the phone numbers on the emergency release card should we need to re-locate to our alternate site.

If local telephone lines are unavailable, utilize your out-of-state contact number for information. If possible, we will call that number to give information on your child and to see if you have left any information for us.

Thank you for your attention to this matter. Please feel free to contact the child care center if you have any questions regarding our Crisis/Disaster Plan.

Keeping your children safe,

Center Director

APPENDIX A-2: Sample Parent Communication Form	
Dear Parent or Family,	
During a disaster, communication may become challenging. Often it i area phone number than a local or cell number. Our facility is establis relay information throughout a disaster. Please put this number in a c so that you are able to get information about your child should local out-of-area contact is:	shing an out-of-area number to convenient and accessible place
Name:	
Phone #:	
Please familiarize yourself with the disaster plans and policies establish	hed for our child care facility.
Please sign and return the following portion:	
I have received information regarding your child care facility's out-of-a have received information about your Crisis/Disaster Plan. I understan my review	nd a full copy is available for
Signature: Date: _	
Please provide the following information for our emergency records:	
Child's name:	
Child's out-of-area contact (100+ miles away) Name:	Ph:
Emergency contacts (friends, family or loved ones) 1. Name:	Ph:
2. Name:	Ph:
3. Name:	Ph:
Local contacts (the "nearest" acquaintances) Name:	Ph: