

# Crisis Management Resource Guide

This Crisis Management Resource Guide is a collaborative work gathered by Connection Leaders over their decades of experience as coaches and owners of All Star clubs. It is intended as a resource and not as an absolute “how to” for any given situation. Coaches and owners should seek guidance and recommendations from professionals in the field of emergency management and medical professionals for appropriate action plans for their individual situations.

**DEFINITION OF CRISIS:** A crisis is any event that is, or is expected to lead to, an unstable and dangerous situation affecting an individual, group, community, or society as a whole society. Crises are deemed to be negative changes in the security, economic, political, societal, or environmental affairs, especially when they occur abruptly, with little or no warning.

**DEFINITION OF CRISIS MANAGEMENT:** Crisis management is the process by which an organization deals with a major event that threatens to harm the organization, its stakeholders, or the general public. It is considered to be the most important process in public relations.

## Types of possible crises :

- Death of a staff member
- Death of an athlete
- Arrest of staff member
- Intruder
- Catastrophic Athlete Injury
- Parent/customer confrontations
- Firing of an employee
- Social Media/Media situation
- Natural Disaster/Act of Mother Nature
- Fire
- Emergency situation at an Event

## Preparation as a Program Owner

- Designate your lead for communication to parents, athletes, and community
- Prepare templates of communication for different types of crises (letters to parents)
- Prepare templates of statements/press releases for different situations
- Have Emergency contact information for resources in your area: police dept., counselors, etc.
- Designate an emergency word that your athletes, staff, and clients know it means to evacuate
- Designate an emergency meeting place at your facility and each event
- Have contact information for all of your clients readily available
- Determine the type of communication you will be utilizing
- Have the business insurance paperwork and contact information readily available
- Have an attorney on retainer
- Prepare emergency plans and conduct drills
- Have plans for a backup practice facility if needed
- Review resources available from the USASF
- Review Emergency Action Plans with staff on a regular basis

# Emergency Action Plan Resource Guide

## PROTECTING THE CHAMPION

### Accident / Incident Reporting

*A binder with all athletes names and numbers must be available to grab before evacuating at any time.*

If an accident or incident occurs during scheduled practice, lesson, or class...

- 1** Assess severity of issue – **Based on issue, decide on next step. (See First Aid guide and Emergency event protocol)**
- 2** Implement the established protocol for injury, accident, or incident. Define who the onsite personnel in charge is and who must be notified during and after each incident. (Program Director, Owner, Office Manager, etc.)
- 3** Once all steps have been followed and resolution has been met, complete Accident/Incident Forms.
- 4** Contact athlete's parent/guardian immediately regardless of severity and document discussion on the Accident/Incident form.
- 5** Send e-mail to appropriate personnel (owner, director, etc.) with details of incident and plan for follow up.

Post a 911 script and list of all emergency phone numbers that might be needed by every phone in facility

Designate the individual's title who will be responsible for each item to be done, ie: receptionist call 911 and parent, coach stay with athlete/s, etc.

#### Accident/Incident Report, suggested information to be included on the form:

Date and time of incident/accident  
Injured person's name and age  
How the incident occurred  
Coach present  
Witness  
Location of incident  
Treatment  
Released to:  
Follow up:

#### Sample 911 Script: (post near all phones in the facility)

Insert program name, is located at list street address, between cross streets and next to landmark/other business name. Give the phone number you are calling from in case the call is dropped.

- I am calling about a \_\_\_\_\_ year old female/male that has been injured. (or other incident)
- State what the injury is; broken bone, head injury, neck injury, severe bleeding, fainted, etc.
- Tell the dispatcher if the athlete is breathing and conscious.
- The dispatcher may ask how the injury happened. (height she/he fell from, tumbling, etc.)
- Stay on the line with the dispatcher until he/she says you can hang up.
- Have someone wait out front to meet the ambulance and guide them to the injured party.

## Listed in alphabetical order

### ABDUCTION

- 1 **CALL 911** immediately and identify yourself.
- 2 Provide all pertinent information (i.e. person who was abducted, abductor, witnesses, place, time, description of vehicle...)
- 3 Stay on the line and have an assistant contact Office Manager and Club Owner.
- 4 Assist with any emotional response to the incident.

### Automated External Defibrillator (AED)

- Post signs designating where the AED is located in the facility
- Offer AED training to your staff
- Investigate opportunities for grants to get an AED: [hopeysheart.org](http://hopeysheart.org)

### AFTER-HOURS EMERGENCY PREPAREDNESS

This plan should address all functions performed after normal business office hours.

- 1 In the event of an emergency immediately notify 911 and identify yourself.
- 2 Give the location, nature of emergency, and any other pertinent information.

### BOMB THREAT

- 1 In the event a call is received with a bomb threat, stay calm and begin to complete documentation form.
- 2 Immediately **CALL 911** and identify yourself.
- 3 Give the location, nature of the situation, and any other pertinent information.
- 4 Evacuate the building immediately once directed and ensure all dancers and parents/guardians are well away from the building.
- 5 Stay clear of the building.
- 6 Each coach is to account for all athletes and report to both the designated personnel in charge to ensure no one was left behind. Office Manager should take the Contact Binder. If unavailable, Head Coach takes the binder.
- 7 Wait for an ALL-CLEAR signal from emergency responders before re-entering the building.

## BUILDING COLLAPSE

- 1 Alert staff to evacuate all occupants from the building.
- 2 **CALL 911**
- 3 Render First Aid if necessary.
- 4 Stay clear of the building.
- 5 Each coach is to account for all dancers and report to both Office Manager and Program Director to ensure no one was left behind. Office Manager should grab Contact Binder. If unavailable, HC grabs binder.
- 6 Wait for an ALL-CLEAR signal from emergency responders before re-entering the building.

## CHEMICAL RELEASE

- 1 Immediately **CALL 911** and identify yourself. Assisting staff should notify the designated Program personnel.
- 2 Give the location, nature of situation, and any pertinent information.
- 3 Activate Evacuation Plan.
- 4 Each coach is to account for all athletes and report to the designated Program personnel (ie: Office Manager and Club Director) to ensure no one was left behind. Office Manager should take the Contact Binder. If unavailable, Head Coach takes the binder.
- 5 Assist those with special needs.
- 6 Shut all windows and doors and maintain distance.
- 7 Await further instructions from emergency responders.

## CIVIL DISTURBANCE

### Hostage, Active Shooter, Intruder, Armed Offender, or Civil Dispute

- 1 Immediately **CALL 911** and identify yourself.
- 2 Give location, nature of the situation, and any other pertinent information.
- 3 Implement "Lockdown" Procedures.
- 4 Check hallways, bathrooms, closets, outside of your facility, and bring uninvolved, nonthreatening bystanders inside.
- 5 Close and lock all doors.
- 6 Keep everyone seated on the floor away from all doors and windows.
- 7 Turn off the lights in the instructional and office areas.

*Continued on next page.*

## CIVIL DISTURBANCE CONTINUED

- 8 Use caution and discretion in allowing individuals and students back into the unsecured area.
- 9 Take attendance, and prepare a list of missing students and extra individuals in the room.
- 10 All doors should remain locked; staff and students remain sheltered until an emergency responder or staff arrives with further instructions.

## DEATH OF AN ATHLETE/STAFF MEMBER IN THE FACILITY

- 1 Immediately **CALL 911** and identify yourself. Send staff assistance to notify the designated Program personnel (ie: Club Owner and Office Manager)
- 2 Give location, nature of the situation, and any other pertinent information.
- 3 Remove all students and any other individuals from the area.
- 4 Respond to all directions from the 911 dispatcher or the emergency personnel on site.

## EARTHQUAKE

- 1 Duck, Cover, and Hold on by dropping to knees.
- 2 Use desks and tables for cover. Be sure to protect your head by covering with arms. Backs should be towards windows.
- 3 Remain in covered position for at least 60 seconds after shaking ceases.
- 4 Listen for instructions from program staff or emergency personnel and be prepared to evacuate if instructed to do so.

## EXPLOSION

- 1 Immediately **CALL 911** and identify yourself. Send staff to notify the designated Program personnel (ie: Club Owner and Office Manager).
- 2 Give location, nature of the situation, and any other pertinent information. If the explosion is internal, immediately exit the building by using the exit route designated for that area of the building.
- 3 Assist those needing special assistance.
- 4 Close door when leaving instructional area and building.
- 5 Bring contact book to account for all athletes and staff.
- 6 Wait for ALL-CLEAR and further instructions from emergency responders.

## FALLEN AIRCRAFT

- 1 Immediately **CALL 911** and identify yourself. Send staff to notify the designated Program personnel (ie: Club Owner and Office Manager)
- 2 Give location, nature of the situation, and any other pertinent information.
- 3 Immediately exit the building.
- 4 Assist those needing special assistance.
- 5 Close door when leaving instructional areas and building.
- 6 Each coach is to account for all athletes and report to both, designated Program personnel, and the onsite personnel in charge to ensure no one was left behind. The designated person in charge at the time of the incident should take the Contact Binder.
- 7 Wait for ALL-CLEAR and further instructions from emergency responders. **DO NOT PROCEED TO FALLEN AIRCRAFT AT ANY TIME!**

## FIRE

- 1 Pull the FIRE ALARM and Immediately **CALL 911** and identify yourself. Send staff to notify the designated Program personnel (ie: Club Owner and Office Manager).
- 2 Give location, nature of the situation, and any other pertinent information.
- 3 Immediately exit the building if the explosion is internal by using the exit route designated for that area of the building.
- 4 Assist those needing special assistance.
- 5 Close door when leaving instructional area and building.
- 6 Each coach is to account for all athletes and report to the designated Program personnel (ie: Office Manager and Program (Club) Director) to ensure no one was left behind. Office Manager should take the Contact Binder. If unavailable, Head Coach takes the binder.
- 7 Wait for ALL-CLEAR and further instructions from emergency responders.

## FLOOD

- 1 Immediately **CALL 911** and identify yourself. Send staff assistance to notify the designated Program personnel (ie: Club Owner and Office Manager)
- 2 Give location, nature of situation, and any other pertinent information.
- 3 Do not enter flooded areas.
- 4 Await further instructions.

## MEDICAL EMERGENCIES

- 1 Immediately **CALL 911** and identify yourself. Send staff to notify the designated Program personnel (ie: Club Owner and Office Manager)
- 2 Give location, nature of the situation, and any other pertinent information.
- 3 Advise of patient's condition and any first aid provided.
- 4 Assist the person with medical emergency until the help/first-aid provider arrives.

## PHYSICAL / SEXUAL ASSAULT

- 1 Immediately **CALL 911** or notify onsite personnel in charge, based on severity and identify yourself. Send staff to notify the designated Program personnel (ie: Club Owner and Office Manager).
- 2 Give location, nature of the situation, and any other pertinent information.
- 3 Ensure the safety of other athletes, parents/guardians, and staff.
- 4 Isolate the situation if possible.
- 5 Assist the victim, if possible.

## PHYSICAL / SEXUAL ASSAULT

- 1 Immediately **notify onsite personnel in charge**, based on severity and identify yourself. Send staff assistance to notify the designated Program personnel in charge (ie: Club Owner and Office Manager).
- 2 Give location, nature of the situation, and any other pertinent information.
- 3 Limit movement.
- 4 Check with neighboring businesses to see if the issue is complex-wide or isolated. Once the situation is assessed, the designated personnel in charge will contact the power company to find out the issue. Once she or he has information she or he will make a decision for the remainder of the classes and will let all staff know.
- 5 Be prepared to evacuate if advised to do so.

## SEVERE WEATHER

### Tornado, Thunderstorm, Severe Winds

Program Owner will send out information prior to severe weather. (Program follows school district closings) If no message has been sent

- 1 Immediately **notify onsite personnel in charge**, based on severity and identify yourself. Send staff assistance to notify the designated Program personnel in charge (ie: Club Owner and Office Manager).
- 2 Give location, nature of the situation, and any other pertinent information.

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## SEVERE WEATHER CONTINUED

- 3 When severe weather announcement or siren goes off, proceed to safety shelter areas. (list the areas, ie: Storage Closet or Women's bathroom)
- 4 Each coach is to account for all athletes and report to both onsite personnel in charge to ensure no one was left behind. The Club Owner should take the Contact Binder. If unavailable, Head Coach takes the binder.
- 5 Assist those with special needs.
- 6 Assume appropriate shelter positions.
- 7 Doors should remain closed.
- 8 Secure glass doors in the open position to prevent glass from shattering.
- 9 Maintain sheltered position until the all-clear signal is given by the onsite personnel in charge or emergency responders.

## SUICIDE IDEATION

The following procedures should be followed when a student or staff member indicates or admits to being suicidal. Indications of suicide occur when someone verbally, or in writing, makes statements as to a desire to hurt themselves or take their own life.

- 1 Certified staff should supervise the student or staff member at all times.
- 2 Immediately **CALL 911** and notify the onsite personnel in charge. **National Suicide Prevention Lifeline 1-800-273-8255.**
- 3 Give location, nature of the situation, and any other pertinent information.
- 4 Escort the student or staff member to the office for parent or family notification and further interventions if possible.
- 5 Provide a written statement and complete an incident report.

## TERRORIST THREAT

- 1 Immediately **CALL 911** and notify the on site personnel in charge (ie: Office Manager and Club Owner).
- 2 Give location, nature of the situation, and any other pertinent information.
- 3 Gather information if staff members or athletes are experiencing any form of property loss or safety issues related to any activities.

## WATER FAILURE

- 1 Immediately notify the on site personnel in charge (ie: Office Manager and Club Owner).
- 2 Give location, nature of the situation, and any other pertinent information.
- 3 Do not use or drink water until advised to do so.
- 4 Await further instructions from the onsite personnel in charge or emergency responders.



# FIRST AID GUIDE

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It is recommended that all staff members be certified in CPR, First Aid, the proper use of an AED, and Sexual Child Abuse Prevention education from Darkness to Light. Assign someone to inspect and update the first aid items on hand in the facility on a monthly basis.

## Listed in alphabetical order

### ASTHMA

#### Symptoms of an Asthma Attack:

- Coughing
- Wheezing
- Chest tightness
- Chest pain
- Prolonged shortness of breath
- Extreme fatigue

Contact Parent First

Athletes with asthma should have specific protocol/instructions on file provided by the athlete's doctor or parents. If protocol steps do relieve the distress, **CALL 911**.

### BLEEDING

- 1 Before providing care, put on protective gloves or use a barrier between you and the victim, to reduce the chance of disease transmission while assisting the injured person. Cleanse your hands thoroughly with soap and water when finished.
- 2 **CALL 911** for medical assistance.
- 3 Keep victim lying down.
- 4 Apply direct pressure using a clean cloth or sterile dressing directly on the wound.
- 5 DO NOT take out any object that is lodged in a wound; see a doctor for help in removal.
- 6 If there are no signs of a fracture in the injured area, carefully elevate the wound above the victim's heart.
- 7 Once bleeding is controlled, keep victim warm by covering with a blanket, continuing to monitor for shock.

### BEE STING

- 1 If possible, remove stinger by scraping it off with a blunt edge (e.g., credit card).
- 2 Clean the wound and apply a cold compress to reduce swelling.
- 3 Remove tight clothing and jewelry from areas near the bite in case swelling occurs.
- 4 Watch for signs of shock or allergic reaction. Signs include swelling or itching at the wound site, dizziness, nausea or difficulty breathing. Seek medical attention immediately if any of these signs occur.

*Continued on next page.*

## BEE STING

- 5 Continue monitoring victim for shock until medical help arrives.
- 6 Check victim's **A**irway, **B**reathing, and **C**irculation (**ABC's**). If ABC's are impaired then **CALL 911** and begin CPR. IMPORTANT: only a trained & qualified person should administer CPR.

## BURNS

**First Degree Burn:** Skin will appear red and may be swollen or painful. Generally does not require medical attention.

**Second Degree Burn:** Skin will appear red, blistered and swollen. May require medical attention.

**Third Degree Burn:** Skin will be visibly charred and may be white. Usually very painful. REQUIRES MEDICAL ATTENTION.

### Basic first aid treatment for 1st degree & some 2nd degree burns:

- 1 Submerge burn area immediately in cool water until pain stops.
- 2 If affected area is large, cover with cool wet cloths.
- 3 Do not break blisters if they are present.
- 4 If pain persists but no medical assistance is needed, apply medicated first aid cream or gel and cover with sterile dressing. If medical attention is needed, do not apply any cream. Just cover with a dry, sterile dressing and seek medical help immediately.

### Basic first aid treatment for 3rd degree & some 2nd degree burns:

- 1 **CALL 911!** Third degree burns MUST RECEIVE MEDICAL ATTENTION IMMEDIATELY! DO NOT attempt anything other than keeping the victim calm.

## CLEANING & BANDAGING WOUNDS

- 1 Wash your hands and cleanse the injured area with clean soap and water, then blot dry.
- 2 Apply antibiotic ointment to minor wound and cover with a sterile gauze dressing or bandage that is slightly larger than the actual wound.

## CHOKING

- 1 Ask the victim, "Are you OK?"
- 2 Do not interfere or give first aid if the victim can speak, breathe, or cough.
- 3 If the victim cannot speak, breathe, or cough, ask for someone to **CALL 911** and then perform the Heimlich maneuver (abdominal thrust).

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## CHOKING CONTINUED

### How to perform the Heimlich maneuver:

- 1 Position yourself behind the victim with your arms around victim's stomach.
- 2 Place the thumb-side of your fist above the victim's navel and below the lower end of the breastbone.
- 3 Take hold of your fist with your free hand and pull fist upward and in, quickly and firmly.
- 4 Continue with thrusts until the object is dislodged or airway is clear.

### Infant Choking:

- 1 Place infant face-down on your forearm supporting the head and neck with your hand. Rest your hand on your knee with the infant's head lower than its body.
- 2 With the heel of your hand give four blows between the infant's shoulder blades.
- 3 Turn infant over, place two fingers on the center of the infant's chest (just below the nipples) and perform up to five chest thrusts.
- 4 Repeat until obstruction is clear.

**Seek medical attention after any choking incident, since complications may arise.**

## CUTS

### Minor cuts:

- 1 Wash wound area with soap and water, not alcohol.
- 2 Cover with a sterile gauze bandage.

### Major cuts if blood appears to be gushing or spurting, follow these instructions and call for help.

- 1 Take a clean cloth or towel and press hard on the cut for 10 minutes.
- 2 Do not remove pressure to see if it's working.
- 3 If possible, raise the cut above the level of the chest.
- 4 After 10 minutes, if the bleeding has stopped, cover the cut with a bandage.
- 5 If the bleeding hasn't stopped, try pressing harder for five more minutes and seek medical help.

## CONVULSION/SEIZURE

- 1 Gently prevent person from hurting him or herself on nearby objects. **Do not attempt to restrain or hold athlete while convulsing.**
- 2 Loosen clothing after jerking subsides. (If necessary)
- 3 Have person lie down.

*Continued on next page.*

## CONVULSION/SEIZURE CONTINUED

- 4 Help keep the airway open.
- 5 Turn head to the side in case of vomiting to prevent choking on inhaled vomit. \*Roll athlete on their side.
- 6 Do NOT put anything in athlete's mouth or attempt to give them water.
- 7 If breathing stops, administer mouth-to-mouth resuscitation or CPR.
- 8 After seizure, allow athlete to rest.
- 9 Seek medical attention.

Designate someone to remove other athletes from area and create privacy barrier if possible.

## LOW BLOOD SUGAR

### Signs of Hypoglycemia:

- Cold sweating
- Hunger
- Headache
- Anxiety
- Dizziness
- Blurred vision
- Confusion or lack of awareness
- Convulsions
- Coma

Athletes with a specific protocol for diabetes must have a written plan on file provided by a medical professional.

## EYE INJURIES

- 1 If an object is impaled in the eye, **CALL 911** and DO NOT remove the object.
- 2 Cover both eyes with sterile dressings or eye cups to immobilize. Covering both eyes will minimize the movement of the injured eye.
- 3 DO NOT rub or apply pressure, ice, or raw meat to the injured eye.
- 4 If the injury is a black eye, you may apply ice to cheek and area around eye, but not directly on the eyeball itself.

## HEAD INJURY/CONCUSSION

### Usual symptoms of simple concussion include:

- Headache
- Slight Dizziness
- Queasy Stomach
- Vomiting

*Continued on next page.*

## HEAD INJURY/CONCUSSION CONTINUED

**These usually require an ice pack to the head and rest. Observe for any severe symptoms such as:**

- Unusual drowsiness
- Unequal pupils
- Persistent vomiting
- Confusion
- Lack of coordination

If one or more of these conditions are present, immediately seek medical care. Refer to the resources from the USASF's official brain health partner; Quadrant Biosciences (Clear Edge). Establish a return to play protocol.

## POISON

- 1** Call your local Poison Control Center or 911 for immediate medical attention.
- 2** Antidotes on labels may be wrong! Do not follow them unless instructed by a physician.
- 3** Never give anything by mouth (milk, water, Ipecac, etc.) until you have consulted with a medical professional.
- 4** Keep a one ounce bottle of Ipecac on hand at all times in case of an emergency, and give only when instructed by a physician.
- 5** If the poison is on the skin, flush skin with water for 15 minutes, then wash and rinse with soap and water.
- 6** If poison is in the eye, flush with lukewarm water for 15 minutes. Adults can stand under the shower with eyes open. Always consult medical professionals after any eye injury has occurred.

## SPRAINS & STRAINS

- 1** Elevate the injured joint to a comfortable position.
- 2** Apply an ice bag or a cold compress over the sprain to reduce pain and swelling.
- 3** Ability to move does not rule out fracture.
- 4** Person should not bear weight on a sprain.
- 5** Sprains that continue to swell should be examined by a physician.

## SPRAINS & STRAINS

- 1** Do not leave an unconscious victim alone except to **CALL 911** for medical help.
- 2** Assess the victim's state of awareness by asking if they are OK.
- 3** Check the victim's **A**irway, **B**reathing, and **C**irculation (**ABCs**).
- 4** If the victim's ABCs are not present, perform CPR. IMPORTANT: only a trained & qualified person should administer CPR.
- 5** If ABCs are present and spinal injury is not suspected, place victim on their side with their chin toward the ground to allow for secretion drainage.
- 6** Cover the victim with blanket to keep warm and prevent shock. If victim communicates feeling warm, remove blanket.

# BOMB THREAT DOCUMENTATION FORM

Date of Call: \_\_\_\_\_ Time Call Received/Ended: \_\_\_\_\_

Operator's Name: \_\_\_\_\_ Person Who Received the Call: \_\_\_\_\_

## INSTRUCTIONS:

- 1 STAY CALM. Attempt to keep the caller talking.
- 2 Calmly ask the caller the questions below.
- 3 Complete the form in as much detail as possible. Give initial impressions, and check off what applies as time and circumstance permit.

**EXACT WORDS OF THE CALLER:** \_\_\_\_\_

\_\_\_\_\_

## QUESTIONS TO ASK:

When is the bomb going to explode? \_\_\_\_\_

Where is the bomb right now? \_\_\_\_\_

What kind of bomb is it? \_\_\_\_\_

What does it look like? \_\_\_\_\_

Why did you place it? \_\_\_\_\_

## DESCRIPTION OF CALLER'S VOICE:

Initial Impression: \_\_\_\_\_

Male: \_\_\_\_\_ Female: \_\_\_\_\_ Young: \_\_\_\_\_ Old: \_\_\_\_\_ Loud Voice: \_\_\_\_\_ High Pitch: \_\_\_\_\_ Low Pitch: \_\_\_\_\_

Slow Talking: \_\_\_\_\_ Fast Talking: \_\_\_\_\_ Accent: \_\_\_\_\_ Intoxicated: \_\_\_\_\_ Concealed Voice: \_\_\_\_\_

## MANNER:

Calm: \_\_\_\_\_ Rational: \_\_\_\_\_ Irrational: \_\_\_\_\_ Coherent: \_\_\_\_\_ Incoherent: \_\_\_\_\_ Deliberate: \_\_\_\_\_

Religious/Self-Righteous: \_\_\_\_\_ Angry: \_\_\_\_\_ Emotional: \_\_\_\_\_ Laughing: \_\_\_\_\_

## LANGUAGE:

Excellent, Fluent, Good Vocabulary: \_\_\_\_\_ Average or Normal Vocabulary: \_\_\_\_\_ Poor Grammar, Poor Vocabulary: \_\_\_\_\_

Foul/Vulgar/Use of Profanity: \_\_\_\_\_ Does the voice sound familiar? Yes / No Has this person called before? Yes / No

If voice sounds familiar, who does it sound like? \_\_\_\_\_

## BACKGROUND NOISE:

Initial Impression: \_\_\_\_\_

Totally Quiet: \_\_\_\_\_ Quiet, Faint Noise: \_\_\_\_\_ Voices (conversation): \_\_\_\_\_ Noisy: \_\_\_\_\_ Party Atmosphere: \_\_\_\_\_

Music: \_\_\_\_\_ Office Machines: \_\_\_\_\_ Factory Machines: \_\_\_\_\_ Street Traffic: \_\_\_\_\_ Mixed: \_\_\_\_\_ Trains: \_\_\_\_\_

Planes: \_\_\_\_\_ Highway Traffic: \_\_\_\_\_ Animal Noises: \_\_\_\_\_

**COMMENTS:** \_\_\_\_\_

\_\_\_\_\_

Effective Date: \_\_\_\_\_ Date Revised: \_\_\_\_\_

Discussed with program staff: Date: \_\_\_\_\_ Time: \_\_\_\_\_

*Revise/Update Annually*

<b>NAME OF PROGRAM / SITE:</b>
<b>MAIN BUILDING / SITE CONTACT PERSON:</b>
<b>MAIN CONTACT NUMBER:</b>
<b>ADDRESS:</b>
<b>EMERGENCY EVACUATION PLAN:</b>
<b>GENERAL DIRECTIONS:</b>