

KEEP THE LIST OF NUMBERS LISTED BELOW NEAR THE TELEPHONE

Local Hospital: () _____ - _____

Local Police: () _____ - _____

Sherriff: () _____ - _____

Poison Control Center: () _____ - _____

Ambulance: () _____ - _____

Fire: () _____ - _____

Doctor: () _____ - _____

() _____ - _____

() _____ - _____

() _____ - _____

() _____ - _____