



# AFTER-HOURS

Activity \_\_\_\_\_ Pick-up location and time \_\_\_\_\_

# SCHOOL ACTION PLAN

Cell Phone \_\_\_\_\_ Event/Practice Site \_\_\_\_\_

Has a Facility Use Permit been filed? Yes \_\_\_\_ No \_\_\_\_

Where should the EMS come in case of an emergency? \_\_\_\_\_

Who will call the EMS? \_\_\_\_\_

Who will notify the parent(s) that student is being transported? \_\_\_\_\_

Who opens doors/gates for the EMS? \_\_\_\_\_

Who travels with injured student? \_\_\_\_\_

Who does the follow up? \_\_\_\_\_

Who is responsible for injury? \_\_\_\_\_

Who will be the primary contact? \_\_\_\_\_

Where is the first-aid kit? \_\_\_\_\_

Where is the kit located? \_\_\_\_\_

# FREE!

Who is going to explain the tornado procedures to the students? \_\_\_\_\_

Where is the closest weather shelter? \_\_\_\_\_

Who has keys/access to the weather shelter? \_\_\_\_\_

Who performs a daily site inspection of the facilities? \_\_\_\_\_

Who manages the remainder of the event? \_\_\_\_\_

Who is notifying administration? \_\_\_\_\_

Agreed upon before using the school's facility:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

