

The **Oh Shit Binder**

FAMILY CRISIS PLANNING KIT

A practical workbook for real families, messy lives, and unexpected moments.

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Printable / POD Edition | US Letter 8.5 x 11 | Version 2.0

Stearns Brook Press

Start Here

Print this first, breathe for a minute, then fill out the pages that matter most today.

This binder is not about expecting the worst. It is about making sure your people are not forced to search drawers, phones, glove boxes, group texts, or memory when something urgent happens.

Do this first

- 1 Fill out the Emergency Snapshot.
- 2 Add medications, allergies, doctors, pharmacy, and insurance details.
- 3 Write where important documents are kept. Do not store originals only in this binder.
- 4 Add household, pet, livestock, or caregiving instructions that someone else would need.
- 5 Show one trusted person where the binder lives.

Where this binder will live

Example: kitchen command center, fireproof safe, top desk drawer, emergency tote.

Who knows where it is

Names and phone numbers of trusted people who can find it.

Tiny promise to myself

I do not have to finish everything today. One completed page is better than a perfect binder I never start.

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SECTION 1

Emergency Snapshot

Full name:	_____	Primary emergency contact:	_____
Preferred name:	_____	Relationship:	_____
Date of birth:	_____	Phone:	_____
Phone:	_____	Backup contact:	_____
Address:	_____	Phone:	_____

Medical quick facts

Allergies:	_____
Current medications:	_____
Key diagnoses:	_____
Primary doctor:	_____
Preferred hospital:	_____
Pharmacy:	_____

Important things to know right away

Communication needs, mobility issues, baseline behavior, fears, support needs, or anything emergency responders/caregivers should know.

SECTION 2

Medication Schedule

Medication	Morning	Midday	Evening	Notes

Medication storage notes

Where are meds kept? Are any refrigerated? Locked? In a weekly pill organizer?

Refill and pharmacy notes

Pharmacy, refill dates, mail order, prior authorizations, or pickup helper.

SECTION 4

Utilities and Home Systems

Electric provider / account:		Main breaker location:	
Heat type / fuel company:		Thermostat notes:	
Water source / shutoff:		Septic / sewer notes:	
Internet provider / router:		Trash / recycling:	
Generator / backup power:		Other system notes:	

Shutoff instructions / emergency notes

Write simple steps or where to find the full instructions.

Local emergency resources

Town office, fire department, police, EMS, utility outage number, warming center, neighbor with generator, plow contact.

SECTION 5

Pet Care Overview

Name	Type / breed	Feeding	Medications	Notes

Vet and emergency animal care

Vet name, phone, emergency clinic, vaccination/medical notes, carrier/leash location, microchip numbers, and who can transport animals.

SECTION 6

Adult Child Emergency Plan

Once a child is legally an adult, parents may not automatically have access to medical, school, housing, or financial information. This page is for planning ahead with consent and respect.

Adult child name:

Date of birth:

Phone:

Address / dorm / apartment:

Roommate / partner:

Employer / school:

Vehicle info:

Preferred emergency contact:

Who can physically get to them fastest?

Nearby friend, roommate, neighbor, family member, campus contact, landlord, workplace contact, or trusted support.

SECTION 8

Crisis Communication Scripts

Family update text

Hi everyone. Quick update: [name/situation] is [brief status]. We are focused on [next step]. Please text instead of calling for now. I will send updates when we know more.

Employer message

Hi [name], I am dealing with a family/medical emergency and need to step away today. I will update you as soon as I can. Thank you for understanding.

School message

Hi [name], our family is dealing with an emergency. [Child/student name] may be absent or need support. I will follow up with details when I can.

Landlord / neighbor message

Hi [name], we are dealing with an emergency and may be away from home. Could you please [specific ask]? I appreciate it.

My edited versions

Write versions that sound like you and fit your family.

SECTION 9

Final Wishes Snapshot

My preferences

Burial/cremation, service type, location, clergy/officiant, music/readings, flowers/charity, obituary notes.

Important documents

Will, POA, advance directive, life insurance, funeral plan, cemetery plot, military/veteran documents.

What would comfort my people

Traditions, songs, places, foods, people, faith practices, stories, or anything that would feel meaningful.

Things I do not want

Use this for clear boundaries or preferences.
