

Emergency Action Plan

For youth camp operators in Oklahoma.

Built around the documentation requirements of 63 O.S. §§ 683.24C through 683.24K.

WHAT THIS IS	KEY COMPLIANCE DATES
<p>DOCUMENT TYPE Fillable Compliance Template</p>	<p>ACT EFFECTIVE November 1, 2026</p>
<p>JURISDICTION State of Oklahoma</p>	<p>PLANS ON FILE BY January 1, 2027</p>
<p>STATUTE 63 O.S. §§ 683.24C through 683.24K</p>	<p>REVIEW CADENCE Every 3 years or upon material change</p>
<p>USE Complete, file with county EM director, review every 3</p>	<p>FILED WITH County Emergency Management Director</p>

HOW TO USE THIS TEMPLATE

Applicability: HB 1675 applies to youth camps as defined in § 683.24C. Single-day programs with no oversight component and programs operated exclusively by a parent or guardian for their own children are excluded.

1. Complete every applicable section. Fields are fillable digitally in any PDF reader, or print and complete by hand.
2. File the completed Hazard Assessment and EAP with your County Emergency Management Director by January 1, 2027.
3. Review at least every three years, and immediately upon any material change to facilities, terrain, or hazard classifications.
4. Distribute the Parent / Participant Disclosure (Section 09) and collect a signed acknowledgment before each participant's first day.

SECTION 01

Youth Camp Identification

§ 683.24C, § 683.24D

LEGAL NAME OF YOUTH CAMP

DBA / TRADE NAME

FEDERAL EIN / STATE TAX ID

PHYSICAL ADDRESS (STREET, CITY, ZIP)

COUNTY (REGULATING AUTHORITY)

GPS COORDINATES

ELEVATION

MAILING ADDRESS (IF DIFFERENT)

Youth Camp Type (check all that apply)

- Day camp
 Overnight / residential camp
 Seasonal camp
 Specialty camp

Applicability — Under § 683.24D, this Act does not apply to programs conducted solely on a single-day basis with no oversight component, or to programs operated exclusively by a parent or legal guardian for his or her own children. Per § 683.24E(D) and § 683.24F(E), a youth camp hosted at a camp facility uses the camp facility's hazard assessment and emergency action plan.

HOSTED AT A CAMP FACILITY? IF YES, NAME THE FACILITY (THIS CAMP THEN USES THAT FACILITY'S PLAN)

OPERATING SEASON (START)

OPERATING SEASON (END)

MAX CAPACITY (CAMPER)

MAX CAPACITY (STAFF)

MINIMUM CAMPER AGE

MAXIMUM CAMPER AGE

PLAN EFFECTIVE DATE

NEXT REVIEW DUE (≤ 3 YRS)

SECTION 02

Regulating Authority Filing & Coordination

§ 683.24E(C), § 683.24F(D)

"A copy of the site-specific hazard assessment, including updated assessments, shall be submitted to and placed on file with the regulating authority." — § 683.24E(C). The same filing requirement applies to the Emergency Action Plan under § 683.24F(D). The regulating authority is the county emergency management director.

COUNTY EMERGENCY MANAGEMENT DIRECTOR (NAME)

TITLE

24/7 PHONE

OFFICE PHONE

DIRECTOR EMAIL

OFFICE ADDRESS

HAZARD ASSESSMENT
FILED

EAP FILED

LAST REVIEWED

FILED BY (INITIALS)

SECTION 03

Site-Specific Hazard Assessment

§ 683.24E

"...camp facilities, youth camps, and outdoor programs shall conduct a site-specific hazard assessment on or before January 1, 2027, identifying: 1. Applicable severe weather hazards; 2. Proximity to hazard exposure zones; 3. Structural vulnerabilities of buildings and shelters; and 4. Feasible evacuation routes and shelter-in-place locations." — § 683.24E(A)

3.1 — Applicable Severe Weather Hazards

Per § 683.24C(6), check every hazard that poses a foreseeable risk at this site. Hazards left unchecked must be justified in the narrative below.

- | | |
|---|---|
| <input type="checkbox"/> Flooding / flash flooding | <input type="checkbox"/> High winds / straight-line winds |
| <input type="checkbox"/> Tornadoic or rotating wind systems | <input type="checkbox"/> Hail |
| <input type="checkbox"/> Lightning | <input type="checkbox"/> Extreme heat |
| <input type="checkbox"/> Extreme cold | <input type="checkbox"/> Wildfire or wildfire smoke |
| <input type="checkbox"/> Other (designated by regulating authority) | <input type="checkbox"/> |

HAZARD HISTORY AT THIS SITE (PAST 10 YEARS) AND RATIONALE FOR ANY HAZARDS EXCLUDED ABOVE

3.2 — Proximity to Hazard Exposure Zones

A "hazard exposure zone" is an area identified through federal, state, or local data as subject to one or more severe weather hazards (§ 683.24C(3)).

HAZARD ZONE TYPE	SOURCE (FEMA / OK FORESTRY / NWS / COUNTY GIS)	DISTANCE	ON-SITE?

3.3 — Structural Vulnerabilities of Buildings & Shelters

BUILDING / STRUCTURE	CONSTRUCTION TYPE	WIND RATING / VULNERABILITY	BUILT / LAST INSPECTED

BUILDING / STRUCTURE	CONSTRUCTION TYPE	WIND RATING / VULNERABILITY	BUILT / LAST INSPECTED

3.4 — Feasible Evacuation Routes and Shelter-in-Place Locations

PRIMARY ON-SITE SHELTER-IN-PLACE LOCATION(S) — BUILDING NAME AND ROOM

SECONDARY SHELTER-IN-PLACE LOCATION(S)

PRIMARY OFF-SITE EVACUATION DESTINATION (ADDRESS, CONTACT, CAPACITY)

SECONDARY OFF-SITE EVACUATION DESTINATION

SECTION 04

Emergency Action Plan — Required Core Elements

§ 683.24F(A)

"...develop and maintain an emergency action plan addressing, at a minimum: 1. Monitoring and detection; 2. Decision-making authority and chain of command; 3. Criteria for evacuation versus shelter-in-place; 4. Evacuation routes and secondary alternatives; 5. Shelter standards; 6. Accountability procedures; and 7. Post-event communication and reunification." — § 683.24F(A)

4.1 — Monitoring & Detection of Severe Weather

COMPLIANCE NOTE

§ 683.24G(1) requires at least one alert-receiving method that does not rely on cellular service. Acceptable methods include a NOAA Weather Radio with the county SAME code programmed, or an on-site weather station whose alerting hardware operates independently of the cellular network. Record the equipment model and station ID below.

PRIMARY MONITORING METHOD (NON-CELLULAR REQUIRED — NOAA RADIO, ON-SITE STATION, ETC.)

SECONDARY MONITORING METHOD (CELLULAR ALERT APP, SECONDARY FEED, ETC.)

DESIGNATED WEATHER MONITOR

BACKUP MONITOR

MONITORING INTERVAL

4.2 — Decision-Making Authority & Chain of Command

Order 1 is the primary decision-maker. Authority passes down the list if unavailable.

ORDER	ROLE / TITLE	NAME	CELL PHONE	OFF-SITE PHONE

4.3 — Criteria for Evacuation vs. Shelter-in-Place

CONDITIONS THAT TRIGGER SHELTER-IN-PLACE

CONDITIONS THAT TRIGGER ON-SITE EVACUATION

CONDITIONS THAT TRIGGER OFF-SITE EVACUATION

4.4 — Evacuation Routes and Secondary Alternatives

PRIMARY ON-SITE EVACUATION ROUTE (FROM WHERE, TO WHERE, BY WHAT PATH)

SECONDARY ON-SITE EVACUATION ROUTE

PRIMARY OFF-SITE EVACUATION ROUTE

SECONDARY OFF-SITE EVACUATION ROUTE

TRANSPORTATION PROVIDER	CONTACT #	VEHICLE CAPACITY

4.5 — Shelter Standards

"Shelters must be: 1. Appropriately rated for anticipated wind or impact loads; 2. Located outside high-risk zones when feasible; and 3. Clearly marked and accessible." — § 683.24H(A)

SHELTER NAME / ID	HAZARD(S) SERVED	WIND/IMPACT RATING	CAPACITY	MARKED & ACCESSIBLE?

SLEEPING FACILITIES IN HIGH-RISK ZONE? IF YES, DESCRIBE VARIANCE/MITIGATION (§ 683.24H(B))

4.6 — Accountability Procedures

ROSTER / HEADCOUNT PROCEDURE DURING AN INCIDENT (WHO COUNTS, AGAINST WHAT LIST, HOW OFTEN)

BUDDY OR GROUP SYSTEM IN EFFECT

PROCEDURE FOR MISSING CAMPER OR STAFF

4.7 — Post-Event Communication & Reunification

PARENT / GUARDIAN NOTIFICATION PROCEDURE (CHANNELS, TIMING, WHO SENDS, MESSAGE TEMPLATE LOCATION)

PRE-DESIGNATED REUNIFICATION SITE (ADDRESS) AND ID-VERIFICATION PROCEDURE FOR RELEASING MINORS

DESIGNATED MEDIA SPOKESPERSON

BACKUP SPOKESPERSON

SECTION 05

Per-Hazard Response Protocols

§ 683.24F(B)

"The plan shall include separate response protocols for each severe weather hazard reasonably applicable to the site." — § 683.24F(B). Complete a protocol block for every hazard checked in Section 3.1.

5.1 — Tornado / Rotating Wind

ACTIVATION TRIGGERS (SPECIFIC WEATHER PRODUCTS, OBSERVED CONDITIONS, OFFICIAL ALERTS)

IMMEDIATE ACTION STEPS, IN ORDER

DESIGNATED LEAD

ALL-CLEAR AUTHORITY

ALL-CLEAR CRITERIA (SPECIFIC CONDITIONS BEFORE RESUMING ACTIVITIES)

5.2 — Flash Flood / Flood

ACTIVATION TRIGGERS (SPECIFIC WEATHER PRODUCTS, OBSERVED CONDITIONS, OFFICIAL ALERTS)

IMMEDIATE ACTION STEPS, IN ORDER

DESIGNATED LEAD

ALL-CLEAR AUTHORITY

ALL-CLEAR CRITERIA (SPECIFIC CONDITIONS BEFORE RESUMING ACTIVITIES)

5.3 — Severe Thunderstorm / High Winds / Hail

ACTIVATION TRIGGERS (SPECIFIC WEATHER PRODUCTS, OBSERVED CONDITIONS, OFFICIAL ALERTS)

IMMEDIATE ACTION STEPS, IN ORDER

DESIGNATED LEAD

ALL-CLEAR AUTHORITY

ALL-CLEAR CRITERIA (SPECIFIC CONDITIONS BEFORE RESUMING ACTIVITIES)

5.4 — Wildfire / Smoke

ACTIVATION TRIGGERS (SPECIFIC WEATHER PRODUCTS, OBSERVED CONDITIONS, OFFICIAL ALERTS)

IMMEDIATE ACTION STEPS, IN ORDER

DESIGNATED LEAD

ALL-CLEAR AUTHORITY

ALL-CLEAR CRITERIA (SPECIFIC CONDITIONS BEFORE RESUMING ACTIVITIES)

5.5 — Lightning

ACTIVATION TRIGGERS (SPECIFIC WEATHER PRODUCTS, OBSERVED CONDITIONS, OFFICIAL ALERTS)

IMMEDIATE ACTION STEPS, IN ORDER

DESIGNATED LEAD

ALL-CLEAR AUTHORITY

ALL-CLEAR CRITERIA (SPECIFIC CONDITIONS BEFORE RESUMING ACTIVITIES)

5.6 — Extreme Heat / Cold

ACTIVATION TRIGGERS (SPECIFIC WEATHER PRODUCTS, OBSERVED CONDITIONS, OFFICIAL ALERTS)

IMMEDIATE ACTION STEPS, IN ORDER

DESIGNATED LEAD

ALL-CLEAR AUTHORITY

ALL-CLEAR CRITERIA (SPECIFIC CONDITIONS BEFORE RESUMING ACTIVITIES)

SECTION 06

Communication & Warning Systems

§ 683.24G

"Each camp facility, youth camp, and outdoor program shall maintain: 1. At least two independent methods of receiving severe weather alerts, including one method that does not rely on cellular service; 2. An internal communication system capable of alerting staff and campers promptly; and 3. Procedures for notifying parents or guardians during emergencies."
 — § 683.24G

6.1 — Two Independent Alert-Receiving Methods

METHOD 1 (NON-CELLULAR — REQUIRED)

EQUIPMENT / MODEL

METHOD 2 (MAY BE CELLULAR)

EQUIPMENT / MODEL / APP

LOCATIONS WHERE ALERTS ARE RECEIVED AND WHO MONITORS THEM BY SHIFT

6.2 — Internal Communication System

- | | |
|---|--|
| <input type="checkbox"/> Hand-held two-way radios (UHF/VHF) | <input type="checkbox"/> Outdoor siren / horn |
| <input type="checkbox"/> Public address (PA) system | <input type="checkbox"/> Air horn / bullhorn |
| <input type="checkbox"/> Hard-wired bell or alarm | <input type="checkbox"/> Mobile push notification to staff |
| <input type="checkbox"/> Runner / messenger procedure | <input type="checkbox"/> Other (describe in narrative) |

HOW STAFF ARE REACHED, HOW CAMPERS ARE REACHED, REDUNDANCY IF POWER/CELL FAILS

6.3 — Parent / Guardian Notification Procedures

PRIMARY CHANNEL (MASS TEXT, EMAIL, PARENT-PORTAL ALERT, VOICE CALL TREE, ETC.)

BACKUP CHANNEL

SENDER / AUTHORIZED PERSON

APPROVAL REQUIRED FROM

SECTION 07

Shelter Inventory, Marking & Accessibility

§ 683.24H

List every shelter on the property and confirm it meets each requirement of § 683.24H(A). Indicate any variance granted by the regulating authority under § 683.24H(B).

SHELTER ID / NAME	LOCATION (BUILDING / GPS)	CAPACITY	HAZARD RATING	ADA / ACCESSIBLE?	SIGNAGE IN PLACE?

SECTION 08

Staff Training, Drills & Records

§ 683.24I

"Staff shall receive annual training on emergency procedures and hazard recognition." "Youth camps shall conduct periodic drills appropriate to the identified hazards." "Training records shall be maintained and made available for inspection by the regulating authority." — § 683.24I

8.1 — Annual Staff Training Log

TRAINING DATE	TOPIC / HAZARD COVERED	INSTRUCTOR	STAFF ATTENDED	RECORDS LOCATED AT

8.2 — Drill Schedule & Log

DRILL DATE	HAZARD DRILLED	PARTICIPANTS (#)	TIME-TO-SHELTER / NOTES	CONDUCTED BY

SECTION 09

Parent / Participant Written Disclosure & Acknowledgment

§ 683.24J

"Youth camps shall disclose in writing: 1. The existence of material severe weather hazards affecting the site; and 2. The general nature of emergency response procedures. Written acknowledgment of receipt shall be obtained prior to participation." — § 683.24J

9.1 — Hazard Disclosure Statement (provided to each parent/guardian before participation)

Site-specific hazard disclosure language — Describe in plain language the material severe weather hazards at this site (drawn from Section 3.1).

General nature of emergency response procedures (1-2 paragraphs, plain language)

9.2 — Acknowledgment Form (one per participant — photocopy as needed)

CAMPER FULL NAME

DOB

SESSION DATES

PARENT / GUARDIAN NAME

RELATIONSHIP

PARENT / GUARDIAN SIGNATURE

DATE SIGNED

Signed acknowledgment must be received PRIOR to the participant's first day. Retain with camper file.

SECTION 10

Plan Approval, Signatures & Review Schedule

§ 683.24E(B), § 683.24F(C)

"Hazard assessments and EAPs shall be reviewed and updated: 1. At least once every three (3) years; and 2. Upon material changes to facilities, terrain, or hazard classifications." — § 683.24E(B), § 683.24F(C)

10.1 — Youth Camp Approval

CAMP DIRECTOR — NAME

DATE

CAMP DIRECTOR — SIGNATURE

SAFETY OFFICER — NAME

DATE

SAFETY OFFICER — SIGNATURE

10.2 — Regulating Authority Receipt (County Emergency Management Director)

DIRECTOR — NAME

DATE RECEIVED

DIRECTOR — SIGNATURE

COMMENTS OR REQUIRED CORRECTIVE ACTIONS, IF ANY

10.3 — Review History

REVIEW DATE	REVIEWER	MATERIAL CHANGES NOTED	NEXT REVIEW DUE

SECTION A

Quick-Reference Posting Sheet

Post in every cabin, dining hall, and program area

Tear off, photocopy, and laminate. Verify in print after filling.

YOUTH CAMP NAME

9-1-1 DISPATCH (VERIFY COUNTY PSAP)

COUNTY EM DIRECTOR 24/7

NEAREST HOSPITAL — NAME

PHONE

ADDRESS

CAMP DIRECTOR — CELL

SAFETY OFFICER — CELL

PRIMARY TORNADO / SHELTER LOCATION (BUILDING + ROOM)

PRIMARY FLOOD EVACUATION DESTINATION

PRIMARY WILDFIRE EVACUATION DESTINATION

NOAA WEATHER RADIO FREQUENCY / SAME CODE FOR THIS COUNTY

REUNIFICATION POINT ADDRESS

POSTED BY

DATE POSTED

LAST VERIFIED