

MALLEEFOWL SIGHTING FORM

Malleefowl Preservation Group Inc
PO Box 29, Ongerup, W.A. 6336
Ph: 08 98282007 Fax: 08 98282018
Email: malleefowl.wa@wn.com.au
Web: www.malleefowl.com.au

Date of Sighting: **Area:**

Location: (give as much information at possible – road name, property name, block no. distance from road/intersections, reserve name/no, distance from town etc

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Number of birds sighted: **alive/dead:**

Have malleefowl been seen there before: yes / no

Please describe approximate size of bird seen:

Any other relevant information: (vegetation type, fire history, fox baiting, feral cat sightings, adjoining remnant vegetation, corridors)

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Name and address of reporter:

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Phone:..... **Fax:**..... **Email:**

Are you a member of the Malleefowl Preservation Group? yes / no

Office Use Only:

Sighting code:.....

Officer:..... **Date:**.....