

## Group Wildlife Care Survey October 2006.



Queensland Wildlife  
Rehabilitation Council Inc  
ABN 57 712 538 186

14. What resources do you provide to your members ( eg Food subsidies, Rabies Vaccinations, Cages etc.)  
\_\_\_\_\_  
\_\_\_\_\_
15. Do you provide training activities/workshops for your members? YES / NO  
If yes, please outline courses, frequency and other details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
16. Does your group have a wildlife hotline telephone number? YES / NO  
If yes, what is the number and what areas does it cover? \_\_\_\_\_  
\_\_\_\_\_
17. Does your group have a system for recording statistics on animals handled and release outcomes.  
YES / NO  
If YES would your Group release this information to QWRC YES / NO
18. Are you prepared to supply QWRC with quarterly returns listing the numbers and origin of animals coming into care, reasons why the animal came into care, and release or demise details for each animal? YES / NO
19. If provided, would your group use and maintain a free online recording system? YES / NO
20. Please provide any further comments you may have about wildlife care issues and what your group feels QWRC could do to assist wildlife rehabilitators (Please feel free to add an extra sheet of paper if required)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

Title within group: \_\_\_\_\_

Phone contact: \_\_\_\_\_

Email address: \_\_\_\_\_

**QWRC thanks you for your valued assistance.**