

EchidnaWatch Sighting form



Yes I have seen an echidna

Date and time of sighting: _____ at _____

Was the echidna alive? Yes No

If dead, cause of death: roadkill predator natural unknown

Size/Age: young adult unknown

Habitat: backyard roadside parkland farmland rainforest

woodland open forest (trees>20m) scrub (trees<20m) other

If other, give more information:

I was travelling by: cycle foot vehicle Nearest town/suburb: _____

Location (precise street address, latitude and longitude if known or nearest landmark): _____

Other observations (Tell us about what the echidna was doing and the duration of the sighting. Did it have young?): _____

My contact details

Name: _____

Address: _____

Phone: _____

Email: _____

Yes, I am happy to be contacted for further information

Yes, I would like to receive regular updates on projects and campaigns

Mail or fax completed form or access electronic form and further information at www.wildlife.org.au by clicking on [Wildlife](#) and then [EchidnaWatch](#)

EchidnaWatch is a project of the

Wildlife Preservation Society of Queensland

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