

WILDLIFE RESCUE CENTER OF THE HAMPTONS, INC.  
RESCUE / TRANSPORT INFORMATION SHEET

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

Street Address: \_\_\_\_\_ Town: \_\_\_\_\_

Work Address: \_\_\_\_\_ Town: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Pager: \_\_\_\_\_

E-mail: \_\_\_\_\_

When are you usually available? (Please note hours and A.M. or P.M.

Sat.: \_\_\_\_\_ Sun.: \_\_\_\_\_ Mon.: \_\_\_\_\_

Tues.: \_\_\_\_\_ Wed.: \_\_\_\_\_ Thurs.: \_\_\_\_\_ Fri.: \_\_\_\_\_

May we call you at work to arrange a transport? Yes \_\_\_\_\_ No \_\_\_\_\_

Would you travel outside your local area to pick up  
or drop off an animal? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, how many miles (round trip) would you be  
willing to travel? \_\_\_\_\_ miles

Do you have experience in rescuing, containing the following?

Injured waterfowl or shore birds? Yes \_\_\_\_\_ No \_\_\_\_\_

Injured opossum, squirrel, other mammal? Yes \_\_\_\_\_ No \_\_\_\_\_

Injured bird of prey (hawk or owl)? Yes \_\_\_\_\_ No \_\_\_\_\_

After taking one of our rescue/transport classes are you

Interested in rescue only, transport only or both?

RESCUE ONLY \_\_\_\_\_ TRANSPORT ONLY \_\_\_\_\_ BOTH \_\_\_\_\_

Are you interested in becoming a volunteer at our facility  
in Hampton Bays? Yes \_\_\_\_\_ No \_\_\_\_\_

I understand there is always some risk with rescuing and or transporting injured wild  
animals and hold Wildlife Rescue Center of the Hamptons, Inc. harmless in the  
execution of these rescue/transport operations.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_