



# Frog Finder's Record Sheet

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*Please return your form to the MRCCC at the above contacts*

## DATE AND TIME

Date	
Time	



## YOUR CONTACT DETAILS

Name	
Contact	

## YOUR FROGGING LOCATION

Address		
OR location description		
Latitude/Longitude <u>OR</u> AMG Easting/Northing		

## YOUR SITE CONDITIONS

**Habitat type** (circle) – Creek    Marsh    Dam    Rainforest    Woodland    Grassland

Garden    Sand pile    Other \_\_\_\_\_

**Weather conditions** –

**Any other observations** –

## YOUR FROG/S

Species – if known	Number of individuals encountered	Call recording supplied? (Yes/No)	Photo/s supplied? (Yes/No)

## OFFICE USE – IDENTIFICATION

	Vetting:	Entered
	Officer:	

*The MRCCC gratefully acknowledges the support for this program from:  
 The Sunshine Coast, Noosa, Gympie and Fraser Coast Councils*

*. Appreciation to Cathey Osborne for her generous gift of Celtic frog design for our logo.*

**DONATIONS TO THE MARY CATCHMENT PUBLIC FUND ARE TAX DEDUCTIBLE**

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