

REGISTRATION OF RESCUE AND RINGING FORM
PUBLIC AND CIENTIFIC BRIGADES - ENGLISH
SOS CAGARRO

Type of Brigade: Public Brigade (BP) Scientific Brigade (BC)

Form CODE¹: _____ / _____ / _____ / ____-____.BP
Island Parish Responsible (day-month)

_____ / _____ / _____ / ____-____.BC
Island Parish Responsible (day-month)

FICHA C

Place (building or place, city, parish, Island) _____

km percorridos: Start _____ End _____

Start Point: Lat. _____ Long. _____

End Point: Lat. _____ Long. _____

Hora: Start _____ End _____

Date: ____/____/____

Nº of people in the Brigade: _____

Person in charge/Initials: _____

Contact (telem.): _____

*Coord. should come in the following format: Lat. 36°56'48.68"N; Long. 25°8'47.69"W.

Cory's Code ²	Coordinates GPS* or exact place of rescue (street no name)	State	Already Ringed?	New Ring (nº)	Date of Ringing	Ringer Initials	Down ³ (código)	Wing (mm)	Weight (g)	Tarsus (mm)	Bill Length ⁴ (mm)	Sex	Place of release / Date	Observations
		<input type="checkbox"/> Alive <input type="checkbox"/> Dead <input type="checkbox"/> Injured	<input type="checkbox"/> Yes Old Ring No: _____									<input type="checkbox"/> F <input type="checkbox"/> M		
		<input type="checkbox"/> Alive <input type="checkbox"/> Dead <input type="checkbox"/> Injured	<input type="checkbox"/> Yes Old Ring No: _____									<input type="checkbox"/> F <input type="checkbox"/> M		
		<input type="checkbox"/> Alive <input type="checkbox"/> Dead <input type="checkbox"/> Injured	<input type="checkbox"/> Yes Old Ring No: _____									<input type="checkbox"/> F <input type="checkbox"/> M		
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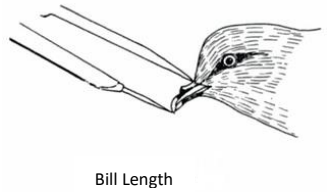
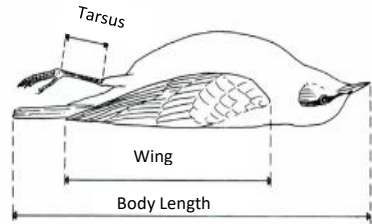
Ringing and measurements are only for LICENCED RINGERS. Do not attempt to handle the birds during the brigades. The individuals will be processed by SOS team.

¹ Example of form code: **São Miguel/Lagoa/KA/20-10.BC** or **São Jorge/Velas/DB/20-10.BP**. This code **HAS TO BE ON THE CARDBOARD BOX**, along with the Cory's code (identifying each individual).

² Código da penugem: **0** – none; **1** – only head; head + neck; only belly; **2** – head + belly **OR** neck + belly **3** – belly, head and back; **4** – belly, head, back and wings.

³ Optional fields. We recommend any ringer to fill as many fields as possible, to respond to a current study on light pollution and cory's morphology.

For more information please email: cagarro@azores.gov.pt or phone **800 292 800**. This form should be kept by the Natural Island Parks and sent to the Regional Directorate for Maritime Policies.



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Start Point²: Lat. _____ Long. _____

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Date: ____/____/____

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		<input type="checkbox"/> Alive <input type="checkbox"/> Dead <input type="checkbox"/> Injured	<input type="checkbox"/> Yes Old Ring No: _____									<input type="checkbox"/> F <input type="checkbox"/> M		
		<input type="checkbox"/> Alive <input type="checkbox"/> Dead <input type="checkbox"/> Injured	<input type="checkbox"/> Yes Old Ring No: _____									<input type="checkbox"/> F <input type="checkbox"/> M		
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