



**Fauna Rescue of South Australia Inc**

24Hr / Phone 08 8289 0896 - Fax 08 8395 8769

Internet: [www.faunarescue.org.au](http://www.faunarescue.org.au) Email: [info@faunarescue.org.au](mailto:info@faunarescue.org.au)

**Cheques & Money Orders should be made payable to: Fauna Rescue of South Australia Inc. and forwarded with this application form to:**

**Fauna Rescue of S.A. Inc.  
6 O'Shea Court, Wynn Vale SA 5127**

**\*\* Please ensure you include your membership fee with this application form. Applications cannot be processed without payment. If you are paying a concession fee please attach a photocopy of your concession card.**

**APPLICATION FOR MEMBERSHIP OF FAUNA RESCUE**

I/WE WISH TO APPLY FOR MEMBERSHIP OF FAUNA RESCUE OF SOUTH AUSTRALIA INC.

(BLOCK LETTERS PLEASE)

Mr/Mrs/Ms SURNAME	<input type="text"/>	Given Names	<input type="text"/>		
Mr/Mrs/Ms SURNAME	<input type="text"/>	Given Names	<input type="text"/>		
Residential Address:	<input type="text"/>	SUBURB	<input type="text"/>	P/CODE	<input type="text"/>
Postal Address:	<input type="text"/>	SUBURB	<input type="text"/>	P/CODE	<input type="text"/>
Phone Nos:	Home: <input type="text"/>	Work: <input type="text"/>	Mobile: <input type="text"/>		
Fax: <input type="text"/>	Email: <input type="text"/>	DOB: <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**MEMBERSHIP TYPE: There are two types of Membership:**

- Please tick relevant Box:**
- "Animal Carer" for volunteers who want to care for wildlife
- "Friend of Fauna Rescue" for members who wish to donate yearly by paying a membership fee or may wish to help out in non animal handling activities. i.e fundraising

- Please tick relevant Box:**
- FAMILY\*      \$35       SINGLE      \$30       STUDENT (16 years or over)      \$20
- FAMILY CONCESSION\*      \$30       SINGLE CONCESSION      \$20       ORGANISATION      \$55
- \* includes all children under 16*

**Please note. that acceptance of this application for membership is conditional on the following, which must be signed by ALL parties to the proposed membership. The Committee of Fauna Rescue has the right to refuse any application for membership if it feels the best interests of the organisation are unlikely to be served.**

1. I/We have no criminal convictions, nor have I/we received any negligence/mistreatment warnings whatsoever, relating to animals.
2. I/We actively agree to the policy of Fauna Rescue of South Australia Inc. which is to rescue, rehabilitate and release (whenever possible) native fauna.
3. **Fauna Rescue of South Australia Inc. accepts no responsibility for loss, damage or injuries resulting from activities undertaken by its members.**
4. We welcome junior members but for safety and other reasons, junior members join as "Family" with a supporting parent.
5. Members must abide by the objects of the Constitution. (The Constitution is available from the Membership Steward.)
6. I/We understand our membership details will be entered on the Fauna Rescue Database used only by the phone coordinators, committee & authorised persons to carry out work on behalf of Fauna Rescue Of South Australia Inc.

**THIS APPLICATION FORM MUST BE SIGNED BELOW OR WE CANNOT ACCEPT YOUR MEMBERSHIP APPLICATION**

**SIGN HERE:** ..... Date: .....

..... Date: .....

**Paid by (please circle)    Cheque      Money Order      PAYMATE**

**For any enquiries regarding this form please contact the Membership Steward, Sue Westover, on 8289 3283**

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We do not expect you to have experience when you join us. Training is available through our monthly workshops or our 'Buddy' System. Our Species Co-ordinators are always available to provide help and advice when needed. Basic Care notes are also available on all species that come into care. **It is compulsory that all new animal carers attend a Workshop or be working with a buddy/coordinator before being placed on call to care for wildlife.**

To enable us to place fauna with a suitable member please tick your areas of interest below. Please consider carefully whether you have or are willing to obtain the appropriate facilities to look after the fauna that you have chosen. If you are not sure if your facilities are satisfactory, need training or more information about fauna that you would like to care for, then contact any of the Species Co-ordinators and they will be able to advise you or supply information notes.

Baby Birds	<input type="checkbox"/>	Echidnas	<input type="checkbox"/>	Rescue/Transport Animals	<input type="checkbox"/>
Ducklings	<input type="checkbox"/>	Kangaroos	<input type="checkbox"/>	Transport Contained Animals	<input type="checkbox"/>
Honeyeaters	<input type="checkbox"/>	Possums	<input type="checkbox"/>	Displays	<input type="checkbox"/>
Lorikeets	<input type="checkbox"/>	Lizards	<input type="checkbox"/>	Educational Talks	<input type="checkbox"/>
Magpies	<input type="checkbox"/>	Turtles	<input type="checkbox"/>	Fundraising	<input type="checkbox"/>
Parrots	<input type="checkbox"/>	Farm Animals	<input type="checkbox"/>	Working Bees	<input type="checkbox"/>
Raptors	<input type="checkbox"/>			Membership drives	<input type="checkbox"/>
Water Birds	<input type="checkbox"/>			Fauna Rescue phone duty	<input type="checkbox"/>
Kookaburras	<input type="checkbox"/>				
Ravens	<input type="checkbox"/>				
All Other Birds	<input type="checkbox"/>				

**DO YOU HAVE TRANSPORT?** Yes  No  **Please indicate how far you will travel? -----kms**

**AVAILABILITY** All Hours Daytime Evenings Weekends After Hours (9pm-7am)  
**Please circle**

Have you any previous experience with wildlife? please give details: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I have the following facilities, Cages/Aviaries (please give dimensions), Tools/Equipment etc.  
 \_\_\_\_\_  
 \_\_\_\_\_

Special Skills: \_\_\_\_\_

Have you ever been a member of Fauna Rescue of S.A. Inc.? \_\_\_\_\_ If so, when? \_\_\_\_\_

Are you a member any other animal organisation/s? \_\_\_\_\_ Please list: \_\_\_\_\_

Where/How did you find out about Fauna Rescue? \_\_\_\_\_

**NEXT OF KIN**

Please list the name and contact number of your next of kin

Name:-----Tel:-----Relationship:-----

**WHY ARE YOU INTERESTED IN BECOMING A FAUNA RESCUE MEMBER?**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**IF YOU ARE JOINING AS AN ANIMAL CARER ARE YOU ABLE TO COMMIT TO ATTENDING WORKSHOPS OR WORKING WITH AN EXPERIENCED CARER/BUDDY?**

YES \_\_\_\_\_ NO \_\_\_\_\_