THE FINDER

Found by              Date              Approximate time              
Address              Post code              Phone number              
Collected/delivered by (if different from above)              
Address              Post code              Phone number              
Bat found at              Grid reference or post code              
Details              
Roost              Known              Grid ref              
Water given by finder              Any feeding by finder              
Any other information              

Passed on for care by              Has anyone been bitten? Yes No              
(signature)              If ‘Yes’ refer to BCT guidelines

Injuries please mark on chart

Dorsal - mark damage

Ventral - mark damage

Initial examination. Date              Time              Who by              
Action taken

RETURN OF BABY/JUVENILE TO ROOST

Date              Time              Result
1              
2              

TREATMENT

Full examination. Date              Time              Who by              
Details              
Vet required              Antibiotics required              Surgery required

Copies of this form can be obtained from: BCT, 5th floor, Quadrant House, 250 Kennington Lane, London, SE11 5RD

Follow up care on continuation sheet BRR2