

World Series of Birding WRITE-IN SIGHTING REPORT



Team Name: _____ Date: _____
Species: _____ Time Sighted: _____ a.m./p.m.
Age: _____ Sex: _____ Plumage: _____
Location: _____
Nearest Town: _____ County: _____
Duration of Study: _____ Distance: _____
Conditions: _____

DESCRIBE THE BIRD. What characteristics noted support this identification and how were similar more expected species eliminated?

Did all team members see the bird well and concur with this identification? Yes No

Are all team members familiar with this species and this plumage? Yes No

If NO, explain: _____

Was this bird a stake out? Yes No

Are you willing or able to have WSB Officials return with you to the site for confirmation? Yes No If NO, on back of this page, please give detailed directions to the site or explain why this is not possible.

Are you aware that this species does not regularly occur in Spring in New Jersey and/or may be very difficult to distinguish from other, regularly occurring species? Yes No

Were there other World Series of Birding Teams in the area which might have recorded this bird?

Yes No Don't know If Yes, which team(s)? _____

Is your confidence level 100% with regards to this identification? Yes No

I certify that all the information contained in this document is true and that I, as signee, have no reservations about including this bird in our team's total.

Print Name

Signature

TEAM CAPTAIN:

INSTRUCTIONS: This form must be completed for any species claimed by your team that is not found on the official World Series Checklist. "Write-in" birds unaccompanied by this form will be deleted from a team's total. **Answer all questions.** Make sure all team members sign this document. If submitting by fax to (609) 884-6052, this must accompany your check list. Note that in the event there are further challenges from event organizers, or a challenge by three captains of competing teams, additional documentation may be required.