FISH TAGGING - CAPTURE FEEDBACK FORM

REWARD ON RECEIPT OF COMPLETED FORM TOGETHER WITH TAG AND/OR SPECIMEN

PERSONAL DETAILS	
Surname	First name
Address	
Postcode	
Telephone	
FISH & TAG DETAILS	
Species	
Fish length	length
Fish width (skates & rays only	
Fish weight	Species: Skates, rays Dogfish
Sex (if known)	male / female (delete as appropriate) [Dognan Flatfish Cuttlefish]
Tag type: (tick appropriate box)	Tag number Tag colour
(if present)	Electronic Acoustic Tag number Tag number Tag number
CAPTURE LOCATION	
Date	
Capture location Latitude Longitude	on: On: On: On: On: On: On: On:
Method of capture (i.e. angling, otter trawl etc.)	

PLEASE RETURN COMPLETED FORM TO:

PROF. D. SIMS

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