

## BROOKLYN AQUARIUM SOCIETY - BAP / HAP SUBMISSION FORM

MEMBER NAME:			
SPECIES LATIN NAME:			
SPECIES COMMON NAME:			
DATE SPAWNED / PROPAGATED:		CLASS:	
SPECIES TYPE: (CHECK ONE) <input type="checkbox"/> FISH <input type="checkbox"/> INVERT <input type="checkbox"/> CORAL <input type="checkbox"/> PLANT			
WATER TYPE: (CHECK ONE) <input type="checkbox"/> FRESHWATER <input type="checkbox"/> SALT WATER <input type="checkbox"/> BRACKISH			
TANK SIZE		SUBSTRATE COLOR	
FILTER TYPE		TEMPERATURE	
WATER CHANGE VOLUME		pH	
WATER CHANGE FREQUENCY		HARDNESS (GH)	
SUBSTRATE TYPE		SPECIFIC GRAVITY (SP.G.)	
SUBSTRATE DEPTH		NUMBER OF FRY	
FOOD(S) USED (CHECK ALL THAT APPLY) <input type="checkbox"/> Live <input type="checkbox"/> Frozen <input type="checkbox"/> Flake <input type="checkbox"/> Freeze Dried <input type="checkbox"/> Other: _____			
SPECIES BRED ON / IN (CHECK ALL THAT APPLY) <input type="checkbox"/> Rock <input type="checkbox"/> Log <input type="checkbox"/> Cave <input type="checkbox"/> Plant <input type="checkbox"/> Glass <input type="checkbox"/> Peat <input type="checkbox"/> Pipe <input type="checkbox"/> Mop <input type="checkbox"/> Filter Tube <input type="checkbox"/> Earth <input type="checkbox"/> Other: _____			

For Coral & Plants fill out the section below as well

PROPAGATION METHOD USED:			
TYPE OF LIGHTING USED:			
TOTAL LIGHTING WATTAGE		# OF HOURS ILLUMINATED	
FERTILIZERS AND SUPPLIMENTS USED (IF ANY)		HOW MUCH / HOW OFTEN	
1			
2			
3			
4			
5			
6			
7			
8			
USING CARBON ENRICHMENT ? <input type="checkbox"/> NO <input type="checkbox"/> YES - DESCRIBE:			

WITNESSED BY	DATE		
<b>DO NOT WRITE BELOW THIS LINE ----- OFFICIAL USE ONLY</b>			
ARTICLE SUBMITTED		# OF PAGES	
FIRST TIME BAS SPAWN		FLOWERED	
RE-VISITED BY		DATE	
CERTIFICATE #		POINTS	
DATE PRESENTED		BAP CHAIRPERSON	