APPLICATION FOR SPECIES RECORD

Name Of Applicant:
Address:
I, the undersigned, hereby certify that the information given below is correct and that the rules as set out by HUC for claiming a record have been complied with in full.
Signature :
Common Name:
Scientific Name And Number:
Date Fish Shot: Weight:
Location/Reef/Area:
Scale (Electronic/Mechanical/Other):
Was Scale Assized:
Give Brief Description Of Fish (Color, Markings, Etc):
Witness To The Weight Of The Above Fish:
1. Name Of Witness:
Address Date:
2. Name Of Witness:
Address Date:
For Office Use Only
Date Received: Date Entered:
Date Certified And Issued:

Committee: Carl Werner(Chairman), Tamara Werner(Secretary), Cabri van Zyl(Treasurer), Don Solomon(Spearfishing Officer)