

Date: _____

The Jersey Shore Aquarium Society
BAP

1. **Member:** Name: _____ Telephone: (____) _____

Address or E-mail: _____

2. **Parent Fish:** Genus: _____ Species: _____ Variety: _____

Male: Age: _____ Standard Length: _____

Female: Age: _____ Standard Length: _____

3. **Water Conditioning:** Tank Size at Spawning: _____ Water Temp: _____ pH: _____ DH: _____

Parent Conditioning? _____ How long: _____ Type & Freq. Of Food: _____

Conditioning Environment: _____

Spawning Environment: _____

% & Freq. Of Water Changes _____ Used To Induce Spawn? _____

Was Temp. Changed To Induce Spawned? _____ Temp. Changed From: _____ To: _____

4. **Spawning Data:** Date Spawed: _____ Date Hatched: _____

Date Free Swimming: _____ Date Fry Began Eating: _____

Spawn Method: _____

First Food or Fry _____ Frequency: _____

Were one or both parents removed after spawning? _____ When? _____ Male: _____ Female: _____

5. **Fry verification:** Approx. No. _____ Date: _____ Signature: _____

6. **Breeder Comments and Summary:** _____

7. **BAP Committee Use Only:** Date: _____ Checked By: _____

Where Fry presented: _____ Article (if req'd) Date: _____

No. of BAP Points Awarded: _____ Total Cum. Points: _____

Specialty Class Elected: _____ 48 Hour Rule for 20 - pt fish: _____

Comments: _____

