

Ohio Cichlid Association Virtual BAP Form

(This form will be used for submission of Virtual BAP due to meeting cancellations related to COVID-19)

Member Name:	Submission Date:
Scientific Name:	
Color Morph or Collection Point:	
Common Name:	Date (Free Swimming):
<input type="checkbox"/> Photo of Fry with Today's Date: Required	<input type="checkbox"/> Photo of Breeders: Optional
Member's Signature:	Date:

Optional Information

Adult Info: where the fish were obtained; the number of fish and sexes; or other known information.
Spawn Info: Describe parental care or how the fish were raised; size of spawn; early foods; or other info.
Tank Info: Size/Capacity of Aquarium; Setup; filtration; other species in tank (list all); or other related info.
Water Conditions: plants; pH; hardness; frequency of water changes; or other related information.
Relevant info not mentioned elsewhere:
Are you offering this species for sale? <input type="checkbox"/> No <input type="checkbox"/> Breeders <input type="checkbox"/> Fry
..... preferred method of contact:

Send Form along with photo(s) to buckeyebulletin@gmail.com