

East Coast Whale Watch Sighting Report

Please fill out the form and send with a disc of photos to:

Peta Beeman
Marine Ecology Research Centre
Southern Cross University
PO Box 157
Lismore NSW 2480

First Name: _____

Last Name: _____

Email Address: _____

Postal Address: _____

Phone Number: (including area code) _____

Date of sighting: (eg: dd/mm/yyyy) _____

Time of sighting: _____ am or pm

Location of sighting: (i.e. port of departure) _____

Position if known, Latitude: _____ and Longitude: _____

Type of vessel (circle one): | Whale Watch | Recreational | Commercial Fishing | Other |

Calf present? | Yes | No | Unsure |

Additional information: (For example, the direction the whales were travelling, whether it was a mother and calf pod, size of the pod, any unusual scarring)

Thank you for supporting whale research