



New York State Marine Fishing Records Official Entry Form

Angler Information

| | | |
|-----------------|-----------|--------|
| Name of Angler: | Phone: | |
| Address: | | |
| City/Town: | | |
| State: | Zip Code: | Email: |

Catch Information

| | | | |
|---------------------|----------------|----------------|-------------|
| Species: | Date of Catch: | | |
| Length: | Weight: | Time of Catch: | ___AM ___PM |
| Name of Water Body: | | | |

Weight Information

Catch must be weighed at an official weigh station on a certified scale (certification must be current).
Weights taken on personal/handheld scales are ineligible.

| | | |
|-----------------------------|----------------------|-----------|
| Official Weigh Station: | Phone: | |
| Address: | | |
| City/Town: | State: | Zip Code: |
| Scale Certification Number: | Date Last Certified: | |
| Name of Weigh Master: | | |

Witness Verification

| | | |
|---------------------|--------|-----------|
| Name of Witness: | | |
| Address of Witness: | | |
| City/Town: | State: | Zip Code: |

Signatures

I hereby swear that the information provided on this form is true and correct to the best of my knowledge and that the taking of the fish described was in accordance with the rules of the New York State fishing regulations and the New York Marine Records Program. Furthermore, I release to the New York State Department of Environmental Conservation, the right to use the above information and any enclosed photographs for promotional purposes, although I understand that this does not restrict my use of the same information and photographs.

| |
|-------------------------|
| Angler Signature: |
| Weigh Master Signature: |
| Witness Signature: |
| Date: |