



FrogWatch Data Form

DATE: _____

TIME: _____ a.m. / p.m.

LOCATION: It is important that the coordinators receive an accurate description of your

FrogWatch observation locations as the distribution of many species - particularly their northern limits - is poorly known.

You can look up your **latitude** and **longitude** co-ordinates at your local library from maps or by using the Internet.

Legal and Land Description: Section, Township, Lot, Concession, etc.

Latitude: ____ ° ____ ' ____ " N

Longitude: ____ ° ____ ' ____ " W

Habitat Type (Please provide a detailed description):

OBSERVATION CHART:

Species	Abundance Code	Species	Abundance Code

Abundance Code:

0 - No frogs or toads seen or heard

1 - Frog(s) or toad(s) seen but not heard

2 - Individuals can be counted, calls not overlapping

3 - Some individuals can be counted, other calls overlapping

4 - Full chorus, calls continuous and overlapping, individuals not distinguishable

FROGWATCHER'S INFORMATION:

Name: _____

Address: _____ Apt.: _____

City/Town: _____ Province/Territory: _____

Postal Code: _____ Telephone: _____

Email: _____

Age (circle one): 5-10 11-15 16-20 21-30 31-55 56 and over