

Cooperative Marine Turtle Tagging Program (CMTTP)
TAG REQUEST FORM

Name of Permit Holder (Print) _____

Affiliation or Name of Organization _____

Mailing Address: _____ _____ _____	Telephone: _____ Email: _____
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Tags for medium to large turtles (National Band & Tag size 681 Inconel): Number of tags requested (in quantities of 100) _____ @ \$129 per 100 tags \$ _____ Number of tag applicators requested _____ @ \$32 each \$ _____
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Tags for small turtles (National Band & Tag size 1005-4 Monel): Number of tags requested (in quantities of 100) _____ @ \$43 per 100 tags, total = \$ _____ Number of tag applicators requested _____ @ \$15 each, total = \$ _____
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NOTE: 1005-4 Monel tags are being offered in response to NMFS recommendations to use small tags on smaller turtles, and due to requests from collaborators. Although Monel tags are usually more vulnerable to corrosion than Inconel tags, the 1005-4 tags are not available in Inconel. Above prices include postage for shipments within USA. There will be an additional charge for all international shipments. If international shipment, please contact us for shipping charges at accstr@ufl.edu.

_____ Check is included (make checks payable to *University of Florida Foundation*).

_____ I will pay by check, as soon as I receive an Invoice (make checks payable to *University of Florida Foundation*).

_____ I will pay by credit card. [Note: There is an additional 3% credit card processing fee charged by the University of Florida Foundation that will be added to all orders paying by credit card. Instructions for payment will be included on the invoice which will be sent out once the tag request order is received.

_____ (Yes or No) I have read the Data Policy statement of the Cooperative Marine Turtle Tagging Program, and I agree with the conditions and stipulations, including submission of my data electronically to the CMTTP, at least once per year, using the required data template.

I understand that NMFS reserves the right to access the CMTTP database for sea turtle management purposes. In addition, below I have checked if any other data use options are allowed by NMFS of the data entrusted to the CMTTP without further permission from me:

_____ No additional use of data without further permission (if checked PLEASE DO NOT check other options).

_____ Presentation or publication of any data.

_____ Presentation or publication of tagging data of “my” tagged turtles recaptured elsewhere.

_____ Presentation or publication of my recapture data of turtles tagged elsewhere.

I also assume responsibility to ensure that no one in my program will use CMTTP tags without first obtaining all necessary State and Federal permits.

Signature of Permit Holder _____

Print or type name _____ Date _____

Email completed request form to: accstr@ufl.edu or mail to: Archie Carr Center for Sea Turtle Research
PO Box 118525, Bartram Hall, University of Florida, Gainesville, FL 32611 USA

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