

INTERNATIONAL COASTAL CLEANUP™ DATA CARD

Data collected during The Ocean Conservancy's International Coastal Cleanup™ is used to educate people and create solutions to the problems of solid waste and litter. Through partnerships with business, government, environmental groups, and citizens, we are helping to change the behaviors and practices that create debris. Thank you for being part of this very important process.



CLEANUP LOCATION

Type of Cleanup: Shoreline/Beach Underwater Location of Cleanup: State _____ Country _____

Zone or County Cleaned: _____ Beach Site Name: _____

Today's Date: Month _____ Day _____ Year _____ Name of Coordinator: _____

Number of People Working on This Card: _____ Distance Cleaned: _____ miles or _____ km

Number of Trash Bags Filled: _____ Total Estimated Weight Collected: _____ lbs. or _____ kgs.

NAMES OF PARTICIPANTS IN YOUR GROUP

If you are interested in becoming a member of The Ocean Conservancy and/or joining our Ocean Action Network (OAN) to make your voice heard on important ocean conservation issues, please check the box(es) below your name and address. **Thank you for helping to protect our oceans!**

1. Name: _____ Age: _____
Address: _____
City: _____ State: _____
Zip Code: _____ Country: _____
Phone: (_____) _____
Email: _____
I would like information on: The Ocean Conservancy The OAN

2. Name: _____ Age: _____
Address: _____
City: _____ State: _____
Zip Code: _____ Country: _____
Phone: (_____) _____
Email: _____
I would like information on: The Ocean Conservancy The OAN

3. Name: _____ Age: _____
Address: _____
City: _____ State: _____
Zip Code: _____ Country: _____
Phone: (_____) _____
Email: _____
I would like information on: The Ocean Conservancy The OAN

4. Name: _____ Age: _____
Address: _____
City: _____ State: _____
Zip Code: _____ Country: _____
Phone: (_____) _____
Email: _____
I would like information on: The Ocean Conservancy The OAN

ENTANGLED ANIMALS: (Dead or Alive). List all entangled animals found during the Cleanup. Tell us what they were entangled in (fishing line, rope, net, etc.) _____

WHAT WAS THE MOST PECULIAR ITEM YOU COLLECTED? _____

The following national and international organizations endorse and/or support the International Coastal Cleanup:

- ◆ U.S. Environmental Protection Agency
- ◆ IUCN – The World Conservation Union
- ◆ Intergovernmental Oceanographic Commission (IOC) of the United Nations' Educational, Scientific, and Cultural Organization (UNESCO)

Please return this card to your area coordinator or mail it to:

The Ocean Conservancy Office of Pollution Prevention and Monitoring
1432 N. Great Neck Road, Suite 103
Virginia Beach, VA 23454 USA
Phone (757) 496-0920
Fax (757) 496-3207
www.oceanconservancy.org



ITEMS COLLECTED



The Ocean
Conservancy
www.oceanconservancy.org

Human-made debris, trash and litter...

- ◆ Harms the environment & wildlife
- ◆ Threatens human health & safety
- ◆ Causes communities to lose money
- ◆ Looks bad!

Think about where all this debris comes from and how **we** can prevent it!

Please pick up **all** debris found on the beach. Record information on **only** the items listed below.

Keep a count of your items using tick marks and enter the item total in the box. **Example:** 8 Beverage Cans |||| |||

SHORELINE AND RECREATIONAL ACTIVITIES

(Debris from beach-goers, sports/games, festivals, litter from streets/storm drains, etc.)

<input type="checkbox"/> Bags _____ <input type="checkbox"/> Balloons _____ <input type="checkbox"/> Beverage Bottles (plastic) 2 liters or less _____ <input type="checkbox"/> Beverage Bottles (glass) _____ <input type="checkbox"/> Beverage Cans _____ <input type="checkbox"/> Caps, Lids _____ <input type="checkbox"/> Clothing, Shoes _____	<input type="checkbox"/> Cups, Plates, Forks, Knives, Spoons _____ <input type="checkbox"/> Food Wrappers/Containers _____ <input type="checkbox"/> Pull Tabs _____ <input type="checkbox"/> 6-Pack Holders _____ <input type="checkbox"/> Shotgun Shells/Wadding _____ <input type="checkbox"/> Straws, Stirrers _____ <input type="checkbox"/> Toys _____
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OCEAN/WATERWAY ACTIVITIES

(Debris from recreational/commercial fishing and boat/vessel operations)

<input type="checkbox"/> Bait Containers/Packaging _____ <input type="checkbox"/> Bleach/Cleaner Bottles _____ <input type="checkbox"/> Buoys/Floats _____ <input type="checkbox"/> Crab/Lobster/Fish Traps _____ <input type="checkbox"/> Crates _____ <input type="checkbox"/> Fishing Line _____ <input type="checkbox"/> Fishing Lures/Light Sticks _____	<input type="checkbox"/> Fishing Nets _____ <input type="checkbox"/> Light Bulbs/Tubes _____ <input type="checkbox"/> Oil/Lube Bottles _____ <input type="checkbox"/> Pallets _____ <input type="checkbox"/> Plastic Sheeting/Tarps _____ <input type="checkbox"/> Rope _____ <input type="checkbox"/> Strapping Bands _____
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SMOKING-RELATED ACTIVITIES

 Cigarettes/Cigarette Filters _____

 Cigarette Lighters _____
 Cigar Tips _____
 Tobacco Packaging/Wrappers _____

DUMPING ACTIVITIES

 Appliances (refrigerators, washers, etc.) _____
 Batteries _____
 Building Materials _____
 Cars/Car Parts _____
 55-Gal. Drums _____
 Tires _____

MEDICAL/PERSONAL HYGIENE

 Condoms _____
 Diapers _____
 Syringes _____
 Tampons/Tampon Applicators _____

DEBRIS ITEMS OF LOCAL CONCERN

(Identify and count 3 other items found that concern you)

