

DEEP SKY OBSERVATION FORM

OBJECT: _____
(NGC, IC, M, OTHER...)

U.T. DATE: _____

OBSERVER: _____

SITE: _____

LONG: _____ LAT: _____

ALT: _____

EQUIPMENT USED - TYPE: _____ APERTURE: _____ F/:

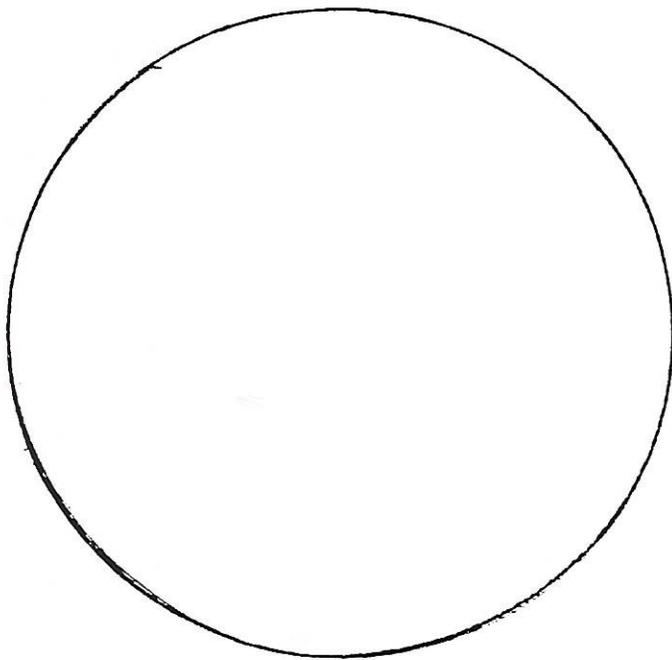
SKY CONDITIONS (1 - 5): _____ TRANSPARENCY (1 - 6): _____

COMMENTS (CLOUDS, HAZE, MOONLIGHT, TWILIGHT, LIGHTS, ETC): _____

U.T. TIME: _____

EYEPIECE: _____

MAGNIFICATION USED: _____



ADDITIONAL COMMENTS: _____
