



Az Exotic Bird Rescue, Inc.

A Charitable Non Profit Avian Rescue & Sanctuary

1290 N. Scottsdale Rd Suite 104 - Tempe, AZ - 85281
(480) 306 - 4690 - www.azexoticbirdrescue.org - info@azebr.org

Please take the time to complete the Surrender Information Form. The more information you provide the better we can meet the birds' needs. Take plenty of time to complete these most important questions. Bring all signed forms with you. Your bird thanks you for the history the two of you have shared. The staff of AZ Exotic Bird Rescue, Inc. thanks you for entrusting the care of your bird and its future in to our most experienced, capable, loving, hands.

Bird Information

Bird's Name: _____ Species: _____

Age or Hatch Date: _____ Sex: Male or Female

Has the bird been DNA tested? ___ Yes ___ No If yes please provide DNA certificate.

When did you acquire the bird? ___ / ___ / ___

Where did you acquire the bird? ___ Pet Store ___ Breeder ___ Shelter/Rescue ___ Friend/Family ___
___ Gift ___ Found ___ Other: _____

How many times has the bird been rehomed? _____ Unknown: _____

History: _____

Medical Information

Did you have a current avian veterinarian? ___ Yes ___ No

Veterinarian's Name: _____ Phone #: _____

Clinic Address: _____

How often did you take your bird for medical care? _____

When was the last visit? ___ / ___ / ___ Reason for the visit? _____

Is the bird micro-chipped? ___ Yes ___ No If yes, please provide information _____

Has the bird ever had any surgeries? _____

Has the bird ever sustained any injuries? _____

Treated for illnesses? _____ List Details & Meds _____

Does the bird have any medical/physical conditions that require treatment and/or specialized caging and play area to protect other birds in our care? Yes No If yes please describe _____

Behavior

Describe the bird's overall condition including eating behaviors, physical appearance and general temperament: _____

Is the bird hand tame? Yes No Please Explain: _____

Does the bird like children? Yes No Describe their interaction: _____

Who is the bird's favorite person? _____

How does the bird interact with other members of the household? _____

Does your bird get along with other pets? Yes No Uncertain

What other pets are in your household? _____

Please describe your bird's current play area and cage _____

How many hours a day/week does the bird spend outside of the cage? _____

How many hours a day is the bird alone? _____ Do you hold your bird? _____

What known behavioral issues has the bird ever had or currently has: _____

Have there been any recent changes in the household? Yes No If yes, please explain: _____

What is the reason for surrender of this bird? _____

Routine Care

Who is the bird's primary caregiver? _____

Describe the bird's favorite toys: _____

Describe the bird's sleeping habits: _____

Does the bird ever have night frights? Yes No If yes, please describe what measures were taken to calm the bird: _____

Is there anything else about the bird we should know? _____

Current Diet

List the foods the bird currently eats including specific brands where appropriate.

Pellets: _____ Seeds: _____ Treats: _____

Nuts: _____ Fruits: _____ Veggies: _____

Cooked Foods: _____

Table Foods: _____

Favorite Foods: _____

How often does the bird receive fresh food and water? _____

Is there anything the bird refuses to eat? _____

I, the undersigned, acknowledge there are risks in visiting and/or handling exotic birds, including illness or injury to myself and/or damage to my property.

I agree to release AZ Exotic Bird Rescue, Inc. from and liability in the event of illness, injury or property damage occurring as a result of my visit(s) and/or my contact with the staff and parrots of AZ Exotic Bird Rescue, Inc.

I have read the above clause and understand the terms. Furthermore, I acknowledge that this release is legally binding and agree to hold AZ Exotic Bird Rescue, Inc. and the staff thereof harmless and free of any and all legal action both at this time and in the future.

Name: _____ Date: ____ / ____ / ____

Signature: _____

Address: _____

Phone #: _____

Email: _____

Request for Release of Medical Information

Dr. _____, please release information on my bird to AZ Exotic Bird Rescue, Inc. as I have surrendered (Birds Name) _____ to their care and ownership. Date: ____ / ____ / ____

Signature: _____

To keep informed as to your parrot's care, adjustment and current status we invite you to contact us via email with your inquiry. Please write to info@azebr.org We welcome your continued interest and value your input. Thank you!

The Staff of AZ Exotic Bird Rescue, Inc.