AVIAN SURRENDER PROFILE

Please take as much time as you need to fill out this form as accurately and honestly as possible. This information will help us match the bird with his/her new adopter. The more information you’re able to provide, the quicker the bird will be adopted. Any dishonest or false information can lead to the owner returning their new bird. Thank you.

PLEASE PRINT CLEARLY!

Reason for surrender: _______________________________________________________________________________________

Bird’s name: ___________________________       Species: ____________________________    Color: ___________________

Age: _______     Sex: ☐ Male ☐ Female ☐ Unknown    How was it determined? ☐ Blood ☐ Eggs ☐ Surgical

Where did you get this bird? _______________________________________________________________________________

Previous owner information, if known: ______________________________________________________________________

Housing

Type and size of cage: __________________________________________________________________________________________

Type and number of perches: _______________________________________________________________________________________

Type and number of toys: ___________________________ Favorite toys: ______________________________

Materials in toys (check all that apply): ☐ Leather ☐ Cotton ☐ Sisal ☐ Rope ☐ Plastic ☐ Wood ☐ Paper

Is the cage covered at night? ☐ Yes ☐ No   With? ________________________      Sleeping cage? ☐ Yes ☐ No

In what room is the cage located? _________________ Activity level of your household? ☐ High ☐ Medium ☐ Low

How often was the cage cleaned? ________   Cage lined with? ☐ Newspaper ☐ Cage litter ☐ Other: ___________

Bird’s Basic Diet

☐ Seed      What percentage of diet and what type of seeds? ______________________________________________

☐ Pellet    What percentage of diet and what type of pellet? ______________________________________________

☐ Veggies   What type, and how often are veggies served? ______________________________________________

☐ Fruits    What type, and how often are fruits served? ______________________________________________

☐ Bread ☐ Pasta ☐ Meat ☐ Dairy ☐ Beans ☐ Rice ☐ Potatoes ☐ Other food items: ____________________________

How often are the above items offered? _________________ Favorite treat/snacks: ___________________________

Vitamin/mineral supplements: ____________________________ Method and frequency given: ____________________

What time of day is the bird usually fed? ________________

Bird’s Routine

How many hours a day is the bird usually left alone? _____________________________________________________

Where is the bird during this time? _________________________________________________________________

How many hours a day is the bird usually out of its cage? ________________________________________________

Where is the bird during that time? _________________________________________________________________

Is the bird supervised when out of its cage? ☐ Yes ☐ No

Is the bird allowed to freely roam when out of its cage? ☐ Yes ☐ No

Hours of light? ___________________________     Hours of darkness? ___________________________
Do you shower/bathe the bird? □ Yes □ No  If yes, with what method? ______________________________

Has the bird been allowed on shoulders? □ Yes □ No

Does the bird have a play stand, T-stand, or Manzanita stand? □ Yes □ No  If yes, which one? __________________

Is the bird flighted? □ Yes □ No  When were wings last trimmed? ______________________________

Does the bird’s beak require regular trimming? □ Yes □ No

Does the bird’s nails require regular trimming? □ Yes □ No

Is the bird used to being towelled? □ Yes □ No

What other methods have you used to restrain the bird? ________________________________

**Bird’s Behavior**

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<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>Can you or another family member handle this bird?</td>
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<td>Does the bird have a favorite person in the household?</td>
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<td>Was the bird ever caged with another bird?</td>
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<td>Was the bird ever bonded with another bird?</td>
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<td>Is the bird accustomed to other pets?</td>
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<td>Does the bird know the step-up command?</td>
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<tr>
<td>Is the bird accustomed to other pets?</td>
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<td>Has the bird shown any feather destructive behavior?</td>
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<td>Has anyone been seriously bitten?</td>
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<td>If yes, what caused the bite?</td>
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<td>Does the bird scream excessively?</td>
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<td>If yes, time of day?</td>
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<td>Under what circumstances?</td>
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<td>What things frighten the bird?</td>
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List bird’s vocabulary:
________________________________________________________________________________________________________
________________________________________________________________________________________________________

**Bird’s Medical History**

Has the bird had previous medical problems? □ Yes □ No  If yes, what? ______________________________

How was it resolved? __________________________________________

When was the bird’s last vet visit? ____________________________  Results? __________________

Last physical? ____________________________  Results? __________________

Last blood work? ____________________________  Results? __________________

Any other information you feel is important about this bird? ________________________________

__________________________________________________________________________________________________

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<th>Other Information</th>
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