

# FINE FEATHERED FRIENDS SANCTUARY

## Surrender Form & Questionnaire

---

Thank you for taking the time to complete this surrender form and questionnaire in its entirety. The information provided will help us understand your bird's needs. Please do not hesitate to call with questions or assistance in completing this form. Please contact your veterinarian for complete medical records and return them with this form.

### Contact Information

Bird's Name \_\_\_\_\_ Species \_\_\_\_\_

Guardian's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

E-mail address \_\_\_\_\_

Why are you considering surrendering your bird? \_\_\_\_\_

Would assistance with education or behavior modification be a possibility as a means for you to keep your bird? \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_ Please explain \_\_\_\_\_

I hereby authorize the release of ALL medical records pertaining to the above listed bird(s) to representatives of this Shelter. \_\_\_\_\_

---

---

---

**Instructions**

I, \_\_\_\_\_ hereby relinquish to Fine Feathered Friends Sanctuary Inc. the above listed bird(s) to be place in the Shelter adoption/placement program. I relinquish all claims to the above listed bird(s).

Relinquisher's Signature \_\_\_\_\_

Print Relinquisher's Name \_\_\_\_\_

Date \_\_\_\_\_

The above-mentioned bird(s) has been accepted for the Shelter by:

Shelter Representative's Signature \_\_\_\_\_

Print Shelter Representative's Name \_\_\_\_\_

Date \_\_\_\_\_

**Bird Information**

Bird(s) Name \_\_\_\_\_ Species \_\_\_\_\_

Hatch Date \_\_\_\_\_ Import Date if Wild Caught \_\_\_\_\_

Bird(s) Age \_\_\_\_\_ Sex \_\_\_\_\_ Method \_\_\_\_\_

When did you acquire your bird? \_\_\_\_\_

Where did you acquire your bird? Pet Store \_\_ Breeder \_\_ Shelter \_\_ Bird Club \_\_ Private Party \_\_

Friend or Family member \_\_ Gift \_\_ Other (explain) \_\_\_\_\_

Please provide contact information for your bird's breeder, pet shop or previous guardian:

Contact name \_\_\_\_\_ Store/Business \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**Health Information*****Please obtain complete vet records and attach to this form.***

Do you currently have an avian vet? \_\_\_\_\_ If yes, please provide contact information.

Clinic Name \_\_\_\_\_ Avian Vet's Name \_\_\_\_\_

Clinic Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Clinic Phone \_\_\_\_\_

How often do you take your bird to the vet? \_\_\_\_\_

When was your bird's last vet visit? \_\_\_\_\_

What was the reason for this visit? \_\_\_\_\_

---

Is your bird banded? \_\_\_\_\_ What is the band number? \_\_\_\_\_

Is your bird micro chipped? \_\_\_\_\_ If yes, what brand? \_\_\_\_\_

Is your bird DNA registered? \_\_\_\_\_ If yes, with whom? \_\_\_\_\_

Describe your bird's overall physical condition: \_\_\_\_\_

---

Has your bird ever sustained any injuries? \_\_\_\_\_ If yes, please describe and give reason

---

Has your bird ever had any surgeries? \_\_\_\_\_ If yes, please describe and give reason

---

Has your bird ever been treated for any diseases? \_\_\_\_\_ If yes, please describe

---

Has your bird ever taken any medication? \_\_\_\_\_ If yes, please list and give reason

---

Has your bird ever been on herbal or other alternative therapies? \_\_\_\_\_ If yes, please describe:

---

---

Does your bird have any medical/physical condition that requires treatment and/or a specialized housing/play area? \_\_\_\_\_ if yes, please describe: \_\_\_\_\_

---

---

### **Diet Information**

---

Describe your bird's current daily diet: \_\_\_\_\_

---

---

Favorite Foods: \_\_\_\_\_

---

---

List the foods your bird currently eats, including specific food names and brands:

Seeds: \_\_\_\_\_ Pellets: \_\_\_\_\_

---

---

Nuts \_\_\_\_\_ Treats \_\_\_\_\_

Cooked Foods: \_\_\_\_\_

Fruits & Vegetables \_\_\_\_\_

Other \_\_\_\_\_

### **Behavior**

Is your bird comfortable being handled \_\_\_\_\_ Please explain \_\_\_\_\_

Are there any other birds or pets in your home? \_\_\_\_\_ If yes, please list (breeds etc.) \_\_\_\_\_

Does your bird interact with other birds or pets? \_\_\_\_\_ If yes, please describe: \_\_\_\_\_

Does your bird like children? \_\_\_\_\_ Please explain \_\_\_\_\_

Does your bird like visitors in the home \_\_\_\_\_ Please explain \_\_\_\_\_

Does your bird have any known behavioral problems (e.g., screaming, plucking, chewing, biting, etc.)?

\_\_\_\_\_ If yes, please describe: \_\_\_\_\_