



**Wasatch Avian Education Society (WAES)**  
**P.O. Box 651701 / Salt Lake City, UT 84165-1701**  
**WasatchAvian@gmail.com**

AVIAN ADOPTION/REHOMING PROGRAM FOR EXOTIC PET  
BIRDS  
**Surrender a Bird**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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

A monetary donation is not required to surrender a bird. However, medical testing and food/toys adds up quickly. We spend at least \$200 on each parrot we take in just in disease testing alone. We very much appreciate any donation which you can comfortably make. WAES is a non-profit organization, tax-exempt under section 501(c)(3) of the Internal Revenue Service Code. Donations to WAES are tax-deductible as allowed by law. WAES does not render tax advice, and donors are encouraged to check with their accountants as to the deductibility of specific gifts.

Amount you are able to donate \$ \_\_\_\_\_

By signing below, I \_\_\_\_\_, understand that I cannot have the above stated bird returned to me after it has been surrendered to WAES. I am sure I want WAES to find this bird a permanent home. I understand that I am no longer the legal owner of this bird and that I will sever all future ties with this bird.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**On the next pages, please tell us as much as you can about this bird. This helps us to place him/her in the best possible home. If you wish to provide more information, please attach additional sheets.**

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Bird's Name: \_\_\_\_\_

Species: \_\_\_\_\_

Subspecies if known: \_\_\_\_\_

Color: \_\_\_\_\_

Identifying Marks: \_\_\_\_\_

Age: \_\_\_\_\_

Sex: \_\_\_\_\_

How Sexed? \_\_\_\_\_

Band/Microchip No.: \_\_\_\_\_

Where did you obtain this bird? \_\_\_\_\_ Date you obtained bird: \_\_\_\_\_

How old was bird when you obtained it? \_\_\_\_\_

## HEALTH

Your Vet's Name: \_\_\_\_\_

Date of most recent visit to vet: \_\_\_\_\_

Reason for Visit to Vet: \_\_\_\_\_

Physical Deformities or Special Needs: \_\_\_\_\_

## DIET

Does the bird eat a pelleted diet? Yes No

If yes, percent of diet : \_\_\_\_\_ % Pellet Brand Name: \_\_\_\_\_

What other foods does the bird eat? \_\_\_\_\_

What are favorite foods and treats? \_\_\_\_\_

## MISCELLANEOUS (circle all that apply):

Does this bird use a... Water Bottle Water Bowl

Bathing preference... Spray Bath Bathe in Bowl Shower with a human Not Sure

Feeding is done.... Morning Evening

Are the wings clipped? Yes No

Does your bird like his cage covered at night? Yes No

Are you donating the cage & toys with the bird? Yes No

Do you have other birds in the house? \_\_\_\_\_ Details: \_\_\_\_\_

Why is this bird being donated to WAES? \_\_\_\_\_

