

# Southeast Texas Avian Rescue

## Donor Form

1. Donor' sName: \_\_\_\_\_
2. Donor' sAddress: \_\_\_\_\_  
City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
3. Donor' sPhone number (include area code): \_\_\_\_\_
4. Donor' sOther contact number: \_\_\_\_\_
5. Specific directions to get to your house: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Species of bird donated: \_\_\_\_\_
7. Bird' s name: \_\_\_\_\_ Age of Bird: \_\_\_\_\_
8. Sex of bird:  Female  Male  Unknown
9. How long has the bird been in your possession? \_\_\_\_\_
10. DNA or surgical testing?  Yes  No  
If yes, list details: \_\_\_\_\_
11. Do you have a certificate available?  Yes  No
12. Why are you placing the bird up for adoption?  
\_\_\_\_\_  
\_\_\_\_\_
13. How many homes has the bird been in? \_\_\_\_\_  
If more than one, why? \_\_\_\_\_  
\_\_\_\_\_
14. Are there other birds or animals in the home?  Yes  No  
If yes, please list.  
\_\_\_\_\_
15. Does the parrot have any specific requirements?  Yes  No  
If yes, please list. \_\_\_\_\_  
\_\_\_\_\_

16. Is a cage, perch, or other items coming with the parrot?  Yes  No

If yes, please list. \_\_\_\_\_  
\_\_\_\_\_

17. What is the parrot's daily diet and food preference?

Please list.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

18. Does the parrot like children?  Yes  No  Unknown

19. Does the bird scream?  Yes  No

20. Does the bird bite?  Yes  No

21. Who is the parrot's avian vet?

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

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

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

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

22. Is the parrot on any medication?  Yes  No

If yes, please list.

\_\_\_\_\_  
\_\_\_\_\_

23. Has the parrot had any diseases or medical problems?  Yes  No

If yes, please list.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

24. Has the parrot had any vaccinations?  Yes  No

If yes, please list.

\_\_\_\_\_  
\_\_\_\_\_

25. Does the cage require covering at night?  Yes  No

26. What is the bird's bedtime? \_\_\_\_\_

27. Has the bird ever bred before?  Yes  No

28. Is the bird banded?  Yes  No

If yes, Band number \_\_\_\_\_

29. Is the bird micro-chipped?  Yes  No

If yes, Chip number \_\_\_\_\_

30. Does the bird talk?  Yes  No

If yes, what are some of the words/phrases he says?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

31. Is there anything else about the bird you would like the new owner to know?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Release form:

I hereby relinquish all rights to the above mentioned bird and all other items mentioned above.

\_\_\_\_\_  
Donor' s signature

\_\_\_\_\_  
Witness' signature

\_\_\_\_\_  
Please print your name

\_\_\_\_\_  
Please print your name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Please mail the completed form to:

Southeast Texas Avian Rescue  
15814 Amesbury Dr  
Houston, TX 77084