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E-mail: <u>akbirdclub@yahoo.com</u>

Mail: The Alaska Bird Club, P.O. Box 101825, Anchorage, AK 99510-1825

Manual: Bring to our monthly educational meeting

Warraur.	bing to our monthly educational meeting
If you have digi	tal images of the bird, please submit them as well; they really help with placement.
Your Info	ormation
Name:	
Address, City, S	tate, ZIP:
E-mail:	
Phone(s):	
permission to s	ertifies that I am 18 years of age or older and am the legal owner of the bird(s) listed on this form. I give hare contact and adoption information with potential adopters as well as the Board and Adoption mbers of The Alaska Bird Club.
If yo	ou do not agree with this, please do not sign this form or proceed; we will not be able to help.
X	

Bird Information (include additional pages if necessary) Name of bird: Age, Gender, Species: Banded? Yes/No Microchipped? Yes/No Additional identification information: How and when was this bird originally obtained? Will you consider Out-of-State placement? Yes/No Is this bird pet-quality? Yes/No Is this a breeder-bird? Yes/No Cage included? Yes/No Reason for re-homing this bird? Name of the bird's veterinarian: Date of last check-up: Was blood work done? Yes/No Is the bird currently healthy (in good feather, proper weight, not sick)? Yes/No Any current or past injuries? Yes/No Additional health information: **Current diet:** Socialization and Behavior information:

Additional general information: