

The Alaska Bird Club
INTENT TO RE-HOME REFFERAL FORM

FILL OUT ELECTRONICALLY AND E-MAIL TO: Kathleen kok@woodscross.net
OR Print and mail to: P.O. Box 101825 Anch, AK 99510

YOUR NAME: _____ City you are in: _____ Date: _____

Name of Bird: _____ Species: _____ Age: _____

Do you have clear title to this bird and do you give permission to share contact and adoption/buyer information with potential adoption sources including ABC Committee Members and Board Members both verbally and by e-mail? Yes ___ No ___ (if not, do not proceed. ABC will not be able to assist).

Any family/household/individual who has previously relinquished 3 or more birds to the Adopt-A-Bird program will not be eligible to adopt through the Adopt-A-Bird Program.

Sex of the bird (if known): _____ Banded? Y N _____ Microchipped? Y N _____

Any other obvious forms of identification?

Is this bird up for adoption? Y N _____ How was this bird originally obtained? _____ When? _____

Will you consider out of State placement? Y N _____

Bird Owner's e-mail (IMPORTANT): _____
Home Phone Number: _____ Alternate phone #'s? (i.e.: work, cell, etc.): _____
Best time to call? _____

Reason for wanted to place bird: _____

Is the bird pet quality? Y N _____ Is the bird a breeder bird? Y N _____ Cage Included? Y N _____

Any other relative information?: _____

Is the bird healthy?: i.e., in good feather? Y N _____ Weight good? Y N _____ Any injuries? Y N _____

Additional health- related comments: _____

Name of Avian Vet: _____ Date of last Vet Check: _____ Was Blood Work Done? Y N _____

Current Diet: _____

Describe the bird's socialization and behavior patterns: _____

Other information: _____

If you have digital photos, please attach to your email. This really helps with the placement.