

# Amazing Grace Bird Rescue

Surrender Form

Rehabilitation, Evaluation & Education Est. 2002

PO Box 341

Mascoutah, IL 62258-0341

Please fill in completely and legibly for the benefit of your bird and this rescue.

Name of Owner(s) \_\_\_\_\_

Address \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

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

Name of Bird \_\_\_\_\_ Date of Surrender \_\_\_\_\_

Species \_\_\_\_\_

How long with current owner? \_\_\_\_\_ Approximate age \_\_\_\_\_

Please check all that may apply to your situation:

- Not enough time – bird's best interest
- Physical problems (feather picking, medical needs)
- Behavior issues (biting, aggression, screaming)
- Bird too difficult to handle (messy, loud, destructive)
- New person in household (spouse, child, etc.)
- Change in living situation/moving
- Owner illness/medical problems/financial hardship
- Death of Owner/family member
- Other \_\_\_\_\_

Name of avian veterinarian \_\_\_\_\_

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Phone Number: \_\_\_\_\_ Address \_\_\_\_\_

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

Sex:  Male  Female  Unknown

By what method was bird sexed? DNA or Surgically (circle one)

If surgically sexed under which wing is tattoo? \_\_\_\_\_

Is this bird Micro Chipped? \_\_\_\_\_ Micro Chip Number \_\_\_\_\_

Company or Micro Chip Brand \_\_\_\_\_

Is bird banded? \_\_\_\_\_ Which leg? \_\_\_\_\_ Is there a date on band? \_\_\_\_\_

**In an effort to provide your bird the best care possible, we ask that you consider providing us, to the best of your knowledge with as much of the birds history as possible on the separate form provided .**

By signing this Avian Surrender Form, you surrender ownership of the bird described above to *AMAZING GRACE BIRD RESCUE*. Your signature on this form also confirms agreement to the following terms:

You attest to *Amazing Grace Bird Rescue* that you are the sole owner of the bird; have the right to transfer its ownership; and that there are no other ownership interests to the bird.

You hereby give permission to your veterinarian (as listed above) to release any and all medical records relating to said surrendered bird to *Amazing Grace Bird Rescue*.

Under this agreement, a surrendered bird may temporarily reside at *Amazing Grace Bird Rescue* or may be placed with an approved foster family, until an appropriate permanent home can be found through our adoption services. You relinquish any rights to the adoption fee that may be applied to this bird.

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Please fill in completely and legibly for the benefit of your bird and this rescue.

In extreme cases, the surrendered bird may become a permanent resident at *Amazing Grace Bird Rescue*. This can include cases involving, but not limited to; abuse, neglect and/or, behavior issues preventing a successful adoption.

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**I hereby release Amazing Grace Bird Rescue and any of its appointed agents and all respective employees and employers from any liability related to any damages, injury claims and expenses of any nature arising from the surrender of my bird to and/or possession of my bird by, Amazing Grace Bird Rescue, its agents and volunteers.**

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**I have read, I understand, and I agree to this contract.**

\_\_\_\_\_  
Printed name of Owner  
Date

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Printed name of AGBR representative  
Date

\_\_\_\_\_  
Signature of AGBR Representative

**For Office Use Only:**

\_\_\_\_\_

