

**SOUTH JERSEY BIRD CLUB
PET BIRD ADOPTION PROGRAM**

Pre-Adoption Application

NAME _____

DATE OF BIRTH _____

PHONE _____

E-MAIL _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

Do ALL adults in your household know that you are applying to adopt a bird?

YES _____ NO _____

Does anyone smoke inside your home? _____

Are their children residing in your home? YES _____ NO _____

If yes, please list their ages

Who will be primarily responsible for the bird's care? _____

Do you live in (circle one) HOUSE - APARTMENT - CONDO - DORM?

Do you RENT or OWN? How long have you lived at this address? _____

If you RENT, do you have permission from your landlord to own a pet bird? _____

Pat Baltozer, Chairwoman
843 Whig Lane Rd.
Glassboro, NJ 08028
856-881-9373
crbpeb@verizon.net

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Landlords's name and phone
number _____

Are you moving in the next 6 months? YES _____ NO _____

What hours are you
home? _____

Do you travel a great deal? YES _____ NO _____

When you are away, what arrangements will be made for the care of the
bird?

How many pets are in your
home? _____ Dogs _____ Cats _____ Other _____

Do you presently own birds? YES _____ NO _____

If yes, please list number and
species _____

Have you previously owned birds? YES _____ NO _____

If yes, please state what species and reason why they are no longer in your
care.

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Why do you want to adopt a bird? _____

Species of bird(s) wishing to adopt:

Why? _____

Are you willing to adopt a difficult, abused or neglected bird?

YES _____ NO _____

Where will the cage be located? _____

How important are these characteristics in a pet bird?(rate on a scale of 1 to 5 with 1 being not particularly important and 5 being very important):

Color _____ Size _____ Intelligence _____ Price/Value _____ Companionship _____
Cuddliness _____ Ease of
Care _____ Talking _____ Uniqueness _____ Personality _____

Veterinarians:(List all used)

NAME _____ PHONE _____

NAME _____ PHONE _____

NAME _____ PHONE _____

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Personal References:

NAME _____ **PHONE** _____

NAME _____ **PHONE** _____

NAME _____ **PHONE** _____

Are you aware that exotic birds may develop bad habits, for example destruction of clothing, furniture, drapery, or anything within reach; biting, screaming dislike of strangers or your mate and/or children; leave droppings; and that these habits can be difficult to break; that birds require a great deal of attention and maintenance; that they can be expensive to feed, maintain in good health, housed appropriately and entertained?

YES _____ **NO** _____

If a bird does develop a bad habit, what would you do? _____

Under what circumstances would you not want to keep the bird?

Moving _____ **Divorce/Separation** _____ **New Baby** _____ **New Job** _____ **Allergy** _____
Does not get along with other pets _____ **New Relationship** _____ **Serious Illness** _____ **Prefers One Person Over Another** _____ **Other** _____

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Please give us any information about yourself that you feel is important for us to take into consideration for your approval for adoption.

By signing of this Pre-Adoption Application, I agree to the following:

It is further understood that upon placement of a bird it is recommended that I become an active member of the South Jersey Bird Club. If distance is a factor and this is not feasible, I will seek out other bird clubs in my area.

I hereby certify that the information given by me in this application is true and complete. I understand that any falsified information that I give will terminate action on the adoption process.

I hereby authorize release/disclosure of records and/or other information concerning all of the foregoing inquires and veterinary records.

DATED _____

Applicant's Signature _____

Parrot Adoption Program
Representative _____

APPLICATION: APPROVED DISAPPROVED

DATE: _____

***This application must be filled out completely & sent to Pat Baltozer at the address listed above with your original signature.

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