



7934 Ripco Rd, Eagle River, WI 54521

715-891-4352

avianoasisrescue@gmail.com

ADOPTION APPLICATION

Name_____

Address:_____

Phone Number:_____

Email:_____

Name of bird(s) you are looking to adopt?_____

There WILL be an adoption fee, do you agree to this fee?_____

(Adoption Fees are non-refundable)

What will you do if the bird does not bond to you or your family and/or it bites?_____

Parrots require 10-12 hours of quiet sleep time, proper food and vet care can be costly, they can be messy, loud, and destructive.... Are you ok with all of these issues?_____

Have you provided the following:

* Picture and/or video of bird cage and room(s)?

* Picture of food you plan to feed your bird?

Do you consent to possible home visit(s) by an Avian Oasis staff member, as well as providing updates regarding how the bird is doing in the future?_____

You agree to not use the bird for breeding purposes?_____

Veterinary contact information for where you will take the bird when needed:_____

You agree to RETURN the bird to Avian Oasis Rescue and Rehabilitation, if you feel you can no longer keep him or her?_____

- You understand if you adopt a bird, you will be responsible for his or her care and well being, will take the bird to the vet as needed and will not seek legal action against Avian Oasis Rescue and Rehabilitation, it's directors or president in the event of death of the bird or any other reason.

SIGN:_____DATE:_____

Avian Oasis Rescue and Rehabilitation

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