

Beak n Wings, Inc.

An Educational Pet Bird Club & Rescue
501(c)3 Non-Profit organization
EIN: 77-0630832

9010-B Rosehill Rd. | Lenexa, KS 66215 | T-913-322-3398 | F-913-322-2583 | www.beaknwing.org

SMALL BIRD ADOPTION APPLICATION

Bird care is a serious responsibility. Beak n Wings' policy is to insure that each person adopting a bird can provide suitable housing, is morally and financially capable of providing for the bird, and is educated in proper care and nutrition for the bird. You must be at least 18 years of age to adopt a bird from Beak n Wings. This application is designed to provide Beak n Wings with necessary information to begin an adoption placement. Please answer all questions and return to the above address. A representative of Beak n Wings will contact you and a home visit may be scheduled. If any questions are left unanswered, your application will not be processed.

NOTE: This application is for smaller birds **ONLY** (Canaries, Finch, Love Bird, Parakeets, Cockatiels, and Doves). If this form is used for any other bird, your application for adoption will **NOT** be considered.

Contact Information

Date submitting adoption application _____

Your Name _____ Partner's Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work/Cell _____

Email: _____

Age Information

Your Age: 18- 26- 46- 66+

Partner's Age: 18- 26- 46- 66+

Family Information

Do you have children living (full or part time) in your home? Yes No If yes, please list names and ages below:

Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

Employment

Employer _____ Your Occupation _____

Years Employed _____ Your work hours _____

Work phone number _____ Work fax number _____

**All information in this application is for the exclusive use of Beak n Wings, Inc.,
and will not be sold or given to any other organization.**

Housing

What type is your residence?

House Condominium Apartment Other _____

Do you rent or own your home? Rent Own If renting, does your landlord allow pets? Yes No

Landlord's Name _____ Phone _____

Health

Does anyone in your household have a health condition (s) that could restrict his / her ability to handle/care for a bird?

Yes No If yes, please describe _____

Does anyone in your home have allergies? Yes No

Smoking

Do you, or does anyone in your household smoke Yes [] No []

If yes, would you be able to provide a smoke-free environment for all foster birds? Yes [] No []

Animals

Do you currently have other birds or animals living in your home? Yes [] No [] If yes, please explain

Birds:

Species _____ How many? _____

Other Animals:

Dog = # _____ Cats = # _____ Reptiles = # _____

Other = # _____

Have you previously owned birds that you no longer own? Yes [] No [] If yes, why do you no longer

have these birds? What happened to them? _____

Veterinarian Information

Do you currently have an avian veterinarian? Yes [] No [] If yes, please provide contact information

Bird Interests & Experience

What species of bird are you interested in adopting? _____

Why this species? _____

Are you interested in adopting for breeding purposes? Yes [] No []

Agreement

I understand the bird (s) must remain in my home. If circumstances were to change I understand I must contact Beak n Wings, Inc, right away. Change of address and phone numbers are to be forwarded to Beak n Wings ASAP **Initial** _____

I agree to a home visit prior to approval. A Beak n Wings representative may make periodic home visits. I also understand references may be contacted prior to approval of this application. **Initial** _____

I, the undersigned, acknowledge there are risks in visiting and / or handling exotic birds, including illness or injury to pets or myself and/or damage to my personal property. **Initial** _____

I agree to release Beak n Wings, Inc., from any liability in the event of illness, injury or property damage occurs as result of my visits and /or exposure to Beak n Wings, Inc., foster or adopted birds. **Initial** _____

I acknowledge that in such activities as dealing with animals, using equipment, driving vehicles and so forth, it is the sole responsibility of me to exercise caution and good judgment to avoid injury. **Initial** _____

I authorize Beak n Wings, Inc to confer with my avian vet regarding the health and care of my current bird (s)/ animals in my home. **Initial** _____

My Avian Vet is: _____ Phone: _____

By my signature, I hereby certify that the information I have provided on this adoption application is true to the best of my knowledge. **Initial** _____

I have read this release and understand its terms. I acknowledge that this release is legally binding. **Initial** _____

Applicant Signature Applicant PRINT Date

Beak n Wings Representative Signature Beak n Wings Representative PRINT Date

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On the back of one of the pages, please describe your home and directions on how to get there.

LEFT BLANK

Beak n Wings, Inc

Release, Waiver & Indemnity
for
Visitors & Volunteers

I, _____, voluntarily and knowingly sign this Release, Waiver & Indemnity (“Waiver”) with the express intention of divesting Beak n Wings, Inc, a Kansas non-profit, from any liabilities and obligations as described below. I understand that any animal can inflict injuries and that the birds at Beak n Wings are birds that have been rescued or given up by their owners, are unpredictable, and may bite or scratch me for any reason or for no reason. I assume all risk associated with Beak n Wings and with viewing, handling, feeding and caring for the birds at Beak n Wings.

I hereby release and forever discharge Beak n Wings and its employees, volunteers, directors, officers, administrators, agents, and assigns (collectively, “Indemnitee”) from all liability for any and all claims, demands, actions, causes of action or suits of any kind or nature whatsoever and particularly on account of any injuries (e.g., including, but not limited to, bird bites), both to person and property, and economic and non-economic losses I may suffer, that may result from, or develop in the future as a result of my handling, viewing, holding, petting, observing or otherwise the birds at or in the possession or control of Beak n Wings, Inc. I further agree that if, despite this Waiver, I or anyone on my behalf makes a claim against Beak n Wings or any Indemnitee, I will indemnify, save and hold harmless Beak n Wings or any Indemnitee from any damages, losses and expenses including, but not limited to, legal fees, courts costs, and litigation expenses.

In exchange for granting this Waiver, I acknowledge that I will be allowed access to the birds at Beak n Wings.

I understand that the following are some, but not all, of the risks associated with being handling birds from Beak n Wings and all birds:

- Bites or scratches from the birds
- Slips, trips and falls resulting from wet or slippery floors
- Hitting head on objects such as cages, perches, cabinets, etc. or other Injuries resulting from cages, perches, cabinets, etc.
- Zoonotic illnesses (human illness contracted from animals)
- Injuries related to lifting animals, food, cages or equipment
- Damage to clothing from animals, cages, chemicals, etc.

I agree to use reasonable care at all times while I am around the birds of Beak n Wings. I agree to follow all rules established by Beak n Wings and have read, understand and agree to the Beak n Wings Rules provided to me concurrently with this Waiver.

I acknowledge and agree that I: (a) fully understand the meaning of this Waiver and recognize my right to seek the advice of an attorney before signing it; (b) have signed it freely and without any inducement or assurance of any nature; (c) intend it to be a complete unconditional release of liability to the greatest extent allowed by law; and (d) agree that, if any portion of this agreement is held to be invalid, the balance notwithstanding shall continue in full force and effect. The acceptance of this waiver shall not operate as an admission of liability on the part of anyone, nor as a waiver or bar with respect to any claim that Beak n Wings may have against the undersigned.

This release is binding on my heirs, executors, assigns and administrators. The undersigned is aware of the risks of visiting or handling the birds at Beak n Wings and hereby assumes all risks. The risks include those foreseen and unforeseen, known and unknown.

I have read this Waiver carefully and fully understand its content, and voluntarily agree to its terms. I acknowledge that, in signing this Waiver, I am waiving certain legal rights, including the right to sue.

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P. O . Box 9228 | Shawnee Mission, KS 66201 | T-913-322-3398 | F-913-322-2583 | www.beaknwings.org

This Waiver is executed on _____, 20_____

Signature Date

Printed Name

Parent/Guardian Signature
(if person is under 18)

Address

City, State & Zip

Phone Number

E-mail

DOB

Driver's License

Beak n Wings Representative Signature

Printed Name of Beak n wings Representative

Our MINIMUM cage requirements:

Parakeets, Cockatiels, Lovebirds, Quakers: 27"w x 24"d

Ringnecks, Conures, Pionus, Lories, Meyers, Senegals: 32"w X 23"d

African Greys, Small Cockatoos, Eclectus, Amazons, Small Macaws: 36"w x 28"d

Larger Cockatoos and smaller Macaws: 48"w x 36"d

We recommend 64"w x 32"d or 80"w x 40"d cages for the larger birds (Moluccans and Greenwing Macaws).

Make sure bar spacing is appropriate for your bird.

For office use only

Name of bird adopted (organization bird name) _____
(must have a name, not type of bird)

For office use only:
DO NOT WRITE IN BELOW SECTION:

Applicant, please make copies of the complete application include this page when you submit your application

Approved

Declined

If declined explain why: _____

Approved for Adoption List Birds:

Bird Name _____ Species _____ Date _____

Bird Name _____ Species _____ Date _____

Bird Name _____ Species _____ Date _____

Bird Name _____ Species _____ Date _____

Signature
VP R/A or ED only

Print
VP R/A or ED only

Date of Home Study _____

NOTE: The surveyor does NOT have the authority to approve or decline an applicant looking to foster. The decision shall be that of the Vice President of Rescue / Adoption or the Executive Director