



1243 Rte 23 North
Wantage, NJ 07461
Tel. 973-702-7770
www.exoticbirdsrefuge.org



Exotic Bird Relinquish Form for Long-Term Permanent Care

BIRDS WILL NOT BE ACCEPTED IN THE SANCTUARY WITHOUT PROPER VETERINARY RECORDS. BIRD MUST HAVE RECENTLY HAD A VETERINARY PHYSICAL, BEEN TESTED FOR PDD, BFD, CHLAMYDIA, ASPERGILLUS, POLYOMA AND PACHECO. BIRD WITH NO RECORDS MUST ENTER THE SANCTUARY WITH A FEE FOR US TO PROVIDE TESTING. FEE FOR ALL ABOVE IS \$900. (This fee is only for vet care and disease testing)

ALL BIRDS ENTERING OUR SANCTUARY WILL BE IN QUARANTINE FOR A MINIMAL OF 30 DAYS.

Owner Information

Name: _____ Date: _____

Full Address: _____

Phone: _____ Email: _____

I hereby surrender and release said Bird:

(please fill out separate form if relinquishing more than one bird)

Name: _____ Species: _____ Type: _____ Band: _____

Age: _____ Hatch Date: _____

Reason for Release of Bird: _____

If moving please provide new home address and telephone Number:

Legal Binding Agreement as per relinquishment of bird

I _____, in agreement with my spouse _____ hereby transfer care and ownership to "Under My Wing Avian Refuge". I (we) relinquish all rights and claims of the above mentioned bird from this day forth and for all future time. Although all attempts have been given to me (us) by Under My Wing Avian Refuge such as keeping the bird, finding the bird a new home and temporarily place the bird at the refuge I/we _____ chose to place the bird with Under My Wing Avian Refuge for Long Term Care and relinquish my (our) right to the birds as of _____.

The act of bringing the bird to the refuge after reading, signing and returning this form prior to moving the bird I, _____ and my spouse _____ shall not exercise to reclaim the bird under any circumstances. The bird has been accepted by Under My Wing Avian Refuge who has been given full claim and control of the bird and under the strict policy that I, (we) have signed shall not peruse to reclaim the bird once the bird enters Under My Wing Avian Refuge's Property. Furthermore, this form shall act as a sworn document.

I _____ and my spouse _____ attest that I (we) are the legal owners(s) of said bird, and have the right to place the bird and I, (we) are signing this agreement of my (our) own free will and not under duress of any kind. I, (we) state that no other person has any legal or financial claim to said bird. All Veterinary records and known history has been released to Under My Wing Avian Refuge. This release forms also gives the rights to Dr. _____ of _____ Hospital, Tel. _____ to release all record Under My Wing Avian Refuge upon their request pertaining to my bird listed above.

Bird detailed Information:

Information about the bird will help us to ease the bird’s stress while acclimating to its new environment and will help us to accommodate him/her with ease. Please answer the following:

Nicknames your bird responds to _____

Basic diet your bird is presently eating _____

Favorite food and treats _____

Last Veterinary visit and reason for visit _____

Vet’s Information. If more than one, please use notation at bottom of form.

Name _____ Address _____

Phone Number _____ Email _____

Commands such as “Step Up” your bird will respond to _____

Any fears and dislikes your bird has shown to have _____

_____ Has your bird shown any preference to men, woman or child? _____

Has the bird been around other birds, if so what kind? _____

Bird prefers bathing, showers or spray bottles. _____

Bird likes to scream, talk, and whine. _____

Words or phrases spoken by the bird _____

Please note any additional information here _____

Bird cage:

Please attach photo of bird cage and list Manufacturer, inside dimension and condition ie: rust, peeled paint....

Bird does not have a cage, therefore I am contributing \$ _____ toward the cost of a cage.

I understand that as per the NJ State Law all NJ rescues/sanctuaries are not allowed to intake any exotic bird without a valid possession permit for the said year.

_____ Relinquished bird has a valid registration with the NJ State Wildlife Permit # _____

_____ Relinquished bird does not have a valid registration. I am including a payment of \$20.00 payable to the State of NJ Wildlife and allowing the Under My Wing to submit registration.

By signing this document, I have read and understand that the foregoing and have agreed to all parts and portions of this document constitute a legal and binding agreement.

Please include all intake fee and continual care when sending your application.

For the Lifetime care of the above mentioned bird Yealy Fee

Small birds \$1,500

Medium Birds \$2,000

Large birds \$2,500

Payment is due upon intake. Arrangements made at time of intake for future years must be made via Secured Payment Plan.

_____I can bring bird and cage to sanctuary.

_____My bird needs to be picked up I am willing to pay travel expense at .40 cents a mile

You may email form back if need be that the bird must be relinquished right away. Remember all fees must be paid at time when bird is relinquished. I further acknowledge that I am releasing the Animal completely voluntarily and that no representations, considerations or promises of any kind have been made to me by UMWAR, or any of its representatives.

I understand that by releasing the Animal to Under My Wing Avian Refuge, I, (we) relinquish all ownership or other interest in the bird. UMWAR is under no obligation whatsoever to follow up with information about the bird.

Please check all that you may wish for us to consider for approval

_____I would like to be set up for visitations

_____Updates via email

_____Other _____

Acknowledgment and Consent

I hereby release and forever discharge Under My Wing Avian Refuge from any and all rights, claims, obligations, liabilities, and causes of action whatsoever arising out of or relating to the ownership, possession, or disposition of the bird, and I agree to indemnify and hold harmless Under my Wing Avian refuge from and against any and all such rights, claims, obligations, liabilities, and causes of action which may be asserted by third parties.

Name_____Spouse's Name_____

Sign_____Spouse Signature_____

Please attach a clear copy of your driver's license (s)

If legally married or separated both parties are obligated to sign. Missing signature of spouse will not allow us to accept bird in our refuge.

Date for bird's transport will be assigned and emailed to you once this application is received.

Thank you for choosing Under My Wing Avian Refuge and entrusting us with you bird's care. We are here to assist you with the process of grief that may occur during separation. Please do not hesitate to reach out for help. Should this be an emergency move for your bird's safety please contact our office 973-702-7770 or Paula's cell 862-268-3059