

BOARD-A-BIRD

Owners name _____
Address _____
Home phone number _____ Work _____ Cell _____
E-mail address _____
Emergency Contact: Name _____ Phone _____
Breed of parrot _____ Name _____ Age _____
Band number or identifying mark _____
Diet _____ Medications _____
Any special needs _____
Avian vet _____ Phone _____
Date of last veterinarian exam and bloodwork _____

I hereby release Board-A-Bird, Dauma and John Glennon, and their representatives, from any and all liability for my boarded bird/s. While every effort will be made to provide a safe and protected environment for your bird/s, the above are not responsible for accidents, injury or illness, including those caused by a natural disaster, burglary or fire. I agree that no legal claim or legal action will be taken against the aforementioned.

I authorize John or Dauma Glennon to seek any medical assistance as deemed necessary. In any case where veterinary care is needed, I agree to pay all related charges including veterinary fees. Birds will be taken to Niles Animal Hospital, or Animal 911 (after hours).

I agree to pay \$ 10.00/\$11.00/\$13.00 per night for the care of my bird, or _____ per night for all of my birds. I am aware that I will pay for any additional nights, food, and medical costs incurred after the dates specified. If the bird/s is left 14 days beyond the pick-up date with no contact from the owner, the bird/s will be deemed abandoned and placed for adoption through an approved agency.

I certify my bird/s has been vet checked within the last year and copies have been provided of the medical record as required by Board-A-Bird.

I have read, understand, and agree to the above terms.

Signed _____ Dated _____

