

Avian Intake Profile

Owner's Name: _____ Phone Number: _____ Email: _____

Date: _____

Bird's Name: _____ Does he/she respond to his/her name?: Yes No

Bird's Color: _____

Reason for Rehoming:

1. How old is your bird? _____ 2. How long have you had your bird? _____

3. Do you have proof of your bird's age? Yes No

4. Your bird's sex: Male Female Unknown

5. Do you have proof of your bird's sex? Yes No

6. What species is your bird?: _____ 7. What subspecies/breed?: _____

8. How did you acquire your bird? Pet store Friend/Family Newspaper/Internet

Gift Stray Shelter/Rescue Group: _____

Breeder: _____ Other: _____

9. How old was your bird when you acquired him/her? _____

10. What kind of food(s) do you feed your bird? Basic seed mix Gourmet seed mix Nuts

Pellets Fresh greens Fresh vegetables Fresh fruits Bread

Pasta Table Scraps Other _____

11. What brand(s) are you feeding? _____

12. How often does your bird eat dry food? Daily Occasionally Never

12. How often does your bird eat fresh food? Daily Occasionally Never

13. What supplements are you offering? _____

14. What treat(s) are you offering? _____

Living Habits

15. My bird is used to living in: apartment/condo house garage balcony
 outdoor enclosure other _____
16. The room my bird is kept: basement living room kitchen child's bedroom
 adult's bedroom spare room other _____
17. My bird's enclosure is: a cage an aviary free-flight
18. The dimensions of the enclosure are: _____
19. The bedding my bird is used to in the enclosure is:
 Newspaper blank newsprint corn cob wood shavings
 other: _____
20. My bird comes out of the enclosure: every day once/week rarely never
21. The length of time my bird's out: 5-15 min 15-30 min 30-60 min 1-2 hrs 2-4 hrs
 4-8 hrs 8-12 hrs 12 hrs + free-flight
22. My birds wings are: clipped fully flighted
23. If wings are clipped, how often is this done? _____
24. My bird is allowed on: all furniture some furniture no furniture
25. My bird's favourite toy(s): _____
26. My bird's problem behaviours include:
 chewing wall trims chewing furniture chewing household items
 ripping household items chewing wires eat household plants
 screaming plucking self mutilation
 cage aggression sexual behaviour
 other aggression: _____
 other: _____

Temperament and Personality

27. My bird is used to: living with children visiting with children not used to children
28. These children are aged: 0-3 yrs 4-6 yrs 7-10 yrs 11-15 yrs 16 yrs+

29. My bird: enjoys being with children tolerates children is nervous of children
 is aggressive towards children
30. How many people live in the household my bird is used to : _____ Adult female, _____ Adult male,
_____ Child female, _____ Child male
31. My bird is used to: living together with the same species living near same species
 has never had contact with the same species
32. My bird is used to: living together with other bird species: _____
 living near other bird species: _____
 has never had contact with other bird species
33. My bird is used to: living with dogs – breed(s)/age(s): _____
 living with cats – age(s): _____
 living with other animal(s): _____
34. My bird is nervous of: dogs cats other animal(s): _____
35. My bird is aggressive with: dogs cats other animal(s): _____
36. With strangers, my bird is usually: friendly nervous aggressive
37. In a new environment, my bird is usually: curious/outgoing nervous/fearful
38. When traveling in the car, my bird is usually: calm/relaxed nervous/fearful
39. My bird is afraid of: _____

Handling

40. My bird will step up: always sometimes never
41. When handling, my bird: enjoys it seems indifferent bites
42. My bird is used to being bathed: every day once/week rarely never
Method: _____
43. When bathing, my bird: enjoys it seems indifferent bites
44. My bird is used to nail trims: regularly rarely never
45. Nail trims are done: at home at a groomer at the vet
46. When trimming nails, my bird: enjoys it seems indifferent bites
47. My bird is used to beak trims regularly rarely never

48. Beak trims are done: at home at a groomer at a vet

Bird's Health Record

49. Veterinary Clinic: _____

50. Veterinarian's Name: _____

51. Clinic Location: _____

52. Clinic Phone #: _____

53. How long have you used this clinic? _____

54. Has this bird been to any other clinic? No Yes: _____

55. Do you have the Veterinary Health Records? Yes No Have been faxed

56. How does your bird react to visiting the vet clinic? Well Poorly Nervous

57. How does your bird react to the veterinarian? Well Poorly Nervous

58. Has your animal had any medical concerns in the past? No Yes

If yes, please specify: _____

59. Does your animal have any current medical concerns? No Yes

If yes, please specify: _____

60. Has the animal been on any medications (including homeopathic remedies) in the past?

No Yes: _____

61. Is the animal currently on any medications (including homeopathic remedies)?

No Yes: _____

62. Have there been any recent changes to the following:

feather condition eye condition foot/leg condition beak condition

appetite energy level breathing perching

other behaviour: _____

63. When was your bird last at the vet? _____

64. What procedures were done? _____

65. Is there any additional information you would like us to know about your bird? In order to match your animal to an appropriate adopter, please provide as much information as possible.?

INTAKE NOTES
