

Bird Guardian Questionnaire



Please tell us about your bird, giving as much detail as possible.
Please see other side if you are surrendering chickens, roosters, or wild birds.

Bird's name:	Age:	Breed/type:
Gender: <input type="checkbox"/> Don't Know <input type="checkbox"/> Male <input type="checkbox"/> Female If known, how was gender verified?		
How long have you had this bird?	How did you acquire this bird?	
Why are you giving up this bird?		

Who is your veterinarian? _____ City where located: _____

Describe current or past medical issues: _____

Date of last check-up: _____ Date of last blood panel: _____ Results? _____

Date wings last clipped: _____ Date nails last clipped: _____

Housing: Indoor cage (size and shape: _____) Loose in house

Outdoor cage (size: _____) Other _____

If your bird spends time outside its cage, where and how often? _____

What other animals has your bird lived with? _____

Describe your bird's diet: _____

What are your bird's favorite foods? _____

This bird likes: Being misted Going into the shower Using a bird bath in the cage

This bird is: Hand trained Stick trained Rides on shoulders

Please list words that your bird knows: _____

Please check any of the following that would apply to your bird:

<input type="checkbox"/> Social and friendly	<input type="checkbox"/> Nips/bites	<input type="checkbox"/> Likes men
<input type="checkbox"/> Likes being petted/held	<input type="checkbox"/> Difficult to remove from cage	<input type="checkbox"/> Likes women
<input type="checkbox"/> Calm	<input type="checkbox"/> Loud or vocal	<input type="checkbox"/> Likes children
<input type="checkbox"/> Shy	<input type="checkbox"/> Likes other birds	<input type="checkbox"/>
<input type="checkbox"/> Skittish	<input type="checkbox"/> Likes other animals	<input type="checkbox"/>

Please list other personality traits: _____

Please describe any behavior problems we should know about: _____

Please see other side if you are surrendering chickens, roosters, or wild birds.

Please answer the following questions if you are surrendering chickens, roosters or wild birds.

Where were they housed? Barn Cage Coop Loose on property Other: _____

Approximate size of cage/area: _____

Diet: _____ Brand: _____

Fed how often? _____

Other foods fed: _____ How often? _____

Please check any of the following that would apply the bird(s):

<input type="checkbox"/> Friendly	<input type="checkbox"/> Doesn't like people	<input type="checkbox"/> Chases animals
<input type="checkbox"/> Easy to pick up	<input type="checkbox"/> Aggressive	<input type="checkbox"/> Will bite
<input type="checkbox"/> Noisy	<input type="checkbox"/> Chases people	<input type="checkbox"/> Seeks attention

Lived with other animals? What types: _____

Likes other birds? _____ What types: _____

Current veterinarian/Animal Hospital: _____ Date of last visit: _____

Medications given: _____ When: _____ Reason: _____

Treated for mites? _____ When: _____ Medication give: _____

Other information: _____

Are you surrendering this animal for safety reasons? Yes_____ No_____

Please describe _____