

BLACKWINDS PET SUPPLIES

2494 Military Rd Niagara Falls NY 14304

(716)297-1751

Adoption Application

PLEASE PRINT NEATLY AND FILL OUT COMPLETELY

Bird ownership is a serious, lifetime responsibility. *Blackwinds Pet Supplies* policy is to insure that each family adopting a bird can provide suitable housing, is morally, emotionally and financially capable of providing for the bird. You must be at least 18 years of age to adopt a bird from *Blackwinds Pet Supplies*. This application is designed to provide *Blackwinds Pet Supplies* with necessary preliminary information to begin our adoption process. If any questions are left unanswered, your application will not be processed. Filling out this application does not guarantee that you will be approved to adopt a bird from *Blackwinds Pet Supplies*. Our first and only concern is for the welfare of the birds that we are privileged to care for.

GENERAL INFORMATION

Date: _____

Name (Person completing form): _____

Phone Number: _____ Fax Number: _____

E-mail Address: _____

Physical Address: _____

Date/time frame you hope to adopt? (Please list month/year): _____

Is there a bird we have up for adoption that you are interested in? If so, who? _____

FAMILY STRUCTURE

1. How many people comprise the family that will be living with the bird? _____

2. How old are you? _____

3. What are everyone else's ages? _____

4. If there are children, have they ever been around birds? _____

BIRD EXPERIENCE

5. Do you currently have other birds living in your home? · Yes · No If yes, please list species and how many:

Species	How Many?	Species	How Many
_____	_____	_____	_____
_____	_____	_____	_____

6. How long you have owned the bird(s) listed above? _____

7. If you currently have a bird(s), what was the date of their last annual check-up? _____

8. Please list the current diet that you feed your bird(s). _____

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9. Have you previously owned a bird(s) that you no longer own? · Yes · No If yes, what happened to these birds?

10. Please list any other bird experience that you may have: _____

11. Do you currently have an avian veterinarian? · Yes · No If yes, please provide contact information:

Avian Vet's Name _____ Clinic Name _____

Clinic Address _____

City _____ State _____ Zip Code _____

Clinic Phone _____ Clinic Fax _____

12. Do you have a cage for a new companion bird? · Yes · No If yes, please provide make, model and size: _____

If no, are you interested in purchasing a cage from *Blackwinds Pet Supplies*? _____

ENVIRONMENT

13. What are your living arrangements? · House · Condo · Townhouse · Apartment · Trailer · Other _____

14. Is there adequate room for a companion parrot? · Yes · No If no, what changes will you be able to make to accommodate the new bird? _____

15. Describe your daily routine at home. _____

16. Does the routine differ on weekends? · Yes · No If yes, please explain: _____

17. Please list your daily work schedule: _____

18. How many hours a day will your bird spend alone: _____

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19. Are there any smokers in the house? · Yes · No If yes, how do you prevent health-related problems due to 2nd hand smoke and nicotine exposure for your bird(s)? _____

OTHER PETS

20. Do you currently have other pets living in your home? · Yes · No If yes, please list species and how many:

Species	How Many?	Species	How Many
_____	_____	_____	_____
_____	_____	_____	_____

BIRD CARE/EDUCATION

21. Do you belong to a bird club? · Yes · No If yes, please list: _____

22. Do you regularly subscribe to any bird related publications? · Yes · No If yes, please list? _____

23. What other organizations, if any, do you belong to or frequent? _____

24. What other sources of information do you use to supplement your knowledge of avian care? _____

ANTICIPATED HOUSEHOLD CHANGES

25. Do you or your partner plan to make a significant change in employment or occupation in the future? · Yes · No

If yes, please explain _____

26. If you do not have children now, do you plan to do so in the future? · Yes · No

27. If your primary or family relationship(s) were to change significantly, what would you do to be able to keep your commitment to a companion bird? _____

28. If your living and/or financial situation were to change dramatically, what would you do to be able to keep a companion bird? _____

29. Please describe the lifestyle changes you might anticipate over the next 5 years? 10 years? 25 years? _____

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30. When you travel or go on an extended vacation, who will care for your bird? _____

31. What provisions have you made for your birds and/or other pets in the event of your illness or death? _____

SPECIES CONSIDERATION

32. What are the most important characteristics you are looking for in a companion bird? _____

33. What species of bird are you interested in adopting? _____

34. What are some traits/needs particular to this species? _____

35. Why this species? _____

36. Explain proper care and nutrition for this species _____

37. Explain proper housing for this species _____

38. What resources have you consulted on this particular species? _____

39. What resources have you consulted on the proper care of companion birds? _____

40. If your adopted bird developed a behavioral problem, how would you deal with the problem? _____

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COMMENTS

41. Is there anything else you would like to add/ask that would help in determining your eligibility? _____

REFERENCES

Please list four references that have known you for over five years. Please list no more than one relative.

Name: _____

Address: _____

Phone #: _____

Name: _____

Address: _____

Phone #: _____

Please check the below boxes to show that you agree with these statements.

- **I understand that if I am approved and adopt a bird that this bird must remain in my home.** If my circumstances change, I understand I must contact Blackwinds Pet Supplies. I will forward any changes to my address(es) and/or phone number(s) to Blackwinds Pet Supplies.
- **I also agree to a home visit prior to approval,** and I understand that a Blackwinds Pet Supplies representative may make periodic visits to my home. I also understand that Blackwinds Pet Supplies may contact my references prior to approval of this application.
- **I understand that completion of this Adoption Application does not guarantee that I qualify to adopt a bird from Blackwinds Pet Supplies**

Applicant Signature

Applicant Name (please print)

Date

PLEASE FILL OUT THIS FORM COMPLETELY TO BE CONSIDERED FOR ADOPTION

Please use additional sheets of paper, if necessary - return to

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