

BIRD BORDING SERVICES CLIENT AGREEMENT AND INFORMATION

Name/s: _____

Address: _____

Home Phone: (_____) _____

Work Phone: (_____) _____

Cell Phone: (_____) _____

Email: _____

I agree that I have requested that Beak n Wings, Inc take care of my pet. I agree to pay the charges accrued for the services provided as outlined in this agreement.

Charge per day: \$

I understand that payment is due day of pick up of your bird.

Owner's Signature: _____ Date: _____

Owner's Name (please print): _____

BORDING PLACEMENT INFORMATION

Expected Placement Date: _____

Expected Pick up Date: _____

Number of expected boarding days: _____

Where can we reach you?

Address: _____

Phone: _____

Email: _____

Do you want us to verify you have returned on time and continue to visit if we do not hear from you?

YES / NO

Would you like us to contact you regularly during the visit?

YES / NO

If yes, please indicate by what method and when/how often:

Additional Notes:

Military personnel:

Should anything happen to you while in active duty status, please tell us what we are to do with your feathered companion (bird(s)). Mark one which applies

_____ Please give my bird(s) to the following person:

(1) Name: _____

Address: _____

City: _____ St: _____ Zip: _____

Phone: _____

Alternate Phone: _____

Email: _____

(2) Name: _____

Address: _____

City: _____ St: _____ Zip: _____

Phone: _____

Alternate Phone: _____

Email: _____

If the above person does not wish to take my bird(s) if I were not capable to care for or if I were to not return from active duty then I wish the birds to remain with Beak n Wings, Inc to do as they need to find a good home. Initial _____

If you initial please make both contacts and Beak n Wings, Inc sections. Beak n Wings will notify your contact persons before attempting to re-home your bird.

_____ I would prefer to have Beak n Wings, Inc to take possession of my bird(s) and have them re-homed into a good for ever home.

Owner of bird please sign _____

