Beak n Wings, Inc.

An Educational Pet Bird Club & Rescue 501(c)3 Non-Profit organization EIN: 77-0630832

9010-B Rosehill Rd. | Lenexa, KS 66215 | T-913-322-3398 | www.beaknwings.org

Multi Bird Surrender

This form is for transfers or surrenders to/from other organizations including Beak n Wings, Inc (ie. Rescue, sanctuary, state officials or animal control).

sanctuary, state officials of animal control).					
* Required	(office use only) Bird Number				
Authorized person name					
Organization Name					
Address		 			
CitySt	ateZip Co	ode			
Phone					
* (This form may be used for over 5 birds coming fr					
 ☐ I have over 5 of the same species for surrender. Number of birds for surrender ☐ I have more then one species of bird for surrener. (use another form for each species over 5 of same species) 					
•	•	•			
How did you obtain this bird(S)?					
Sex of bird # Male # Female □ Unknown	n Age of bird (range)	□ Unknown			
pecies Type: (use one form pre species)					
Do the birds have any known behavior issues (ie. bitting, screaming, hand shy etc)?					
NOTE: If you have 5 Cockatiels and 2 parakeets, you may use this form for the Cockatiels, you will need to use the normal SURRENDER FORM for the two parakeets.					
* Mark which best suites your organization					
☐ State official ☐ Rescue organization ☐ San	ctuary Animal Control	☐ Personal			
By signing below, you are stating that you are a legal representative for relinquishing animals (birds) to Beak n Wings, Inc. I relinquish all claims to the above listed bird and any future progeny. This form is hereby legally binding after signing.					
Legal organization representative or individual:					
Signature Print		Date			
Beak n Wings representative					
Signature Print		Date			

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Shelter License # PS-292

This form is for surrendering birds of over 5 birds of the same species. If you do not have over 5 birds of the same species, you must use the normal SURRENER FORM.

* Required	(office use only) Bird Number			
Authorized person name				
Organization Name				
Address				
	State		Zip Code	
Phone				
* This form may be used	for over 5 birds com	ing from same lo	ocation of the <u>same species</u>	
How did you obtain the bird(S)?				
1 Dind Name	Cov	A ~~	Smariag	
1. Bird Name	Sex	Age	Species	
2. Bird Name3. Bird Name	Sex	Age	Species	
4 Dind Name	C		SpeciesSpecies	
F D' 137		Age Age	Species	
6 D: 137	~		Species	
	Sex	Age	Species	
0 71 137	Sex	Age	Species	
8. Bird Name 9. Bird Name	Sex	Age	Species	
10. Bird Name	Sex	Age	Species	
11. Bird Name	Sex	Age	Species	
12. Bird Name	Sex	Age	Species	
13. Bird Name	Sex	Age	Species	
14. Bird Name	Sex	Age	Species	
15. Bird Name		Age	Species	
16. Bird Name	C	Age	Species	
17. Bird Name	C	Age	Species	
18. Bird Name		Age	Species	
19. Bird Name	Cov	Age	Species	
20. Bird Name		Age	Species	
By signing below, you are stating that you a	re a legal representative	for relinquishing ar	nimals (birds) to Beak n Wings, Inc.	
I relinquish all claims to the above listed bir	d and any future progeny	7. This form is here	by legally binding after signing.	
Legal organization representative/Ow	vner:			
Signature	Print		Date	
D 1 177				
Beak n Wings representative				
C:	Dui4		Data	
Signature	Print		Date	