

## Pigeon/Dove Adoption Application

P.O. Box 14694, Richmond, VA 23221 • Phone: 804-378-2000 • Fax: 804-378-2018 E-mail: healanimals@gmail.com • Website: www.richmondwildlifecenter.org

We appreciate your interest in adopting a Pigeon/Dove from the Richmond Wildlife Center. Pigeons and Doves require different care than dogs, cats, rabbits, rodents, and other pet birds. Because caring for a bird is a serious responsibility and can be more of a challenge than with a cat or a dog, we have developed this questionnaire to aid us in making the best placement possible for the bird and you. The adoption process will take some time. We want to match each bird up with the right home and we want you to have all the necessary information and support you need for a successful adoption. We thank you for your patience and cooperation through this process. Please be aware of the following: You must be 21 years of age or older to adopt a bird. The adoption process may include a home visit depending on species applying to adopt. You will be required to show what type of cage you will use to house the bird and demonstrate that you are able to adequately care for a bird. We may also ask you to provide veterinary records on birds currently in the home.

## PLEASE PRINT AND COMPLETE THE ENTIRE FORM.

Applications and Questionnaires not fully completed may not be given full consideration. All applications must be filled out, signed, and emailed, faxed, or mailed to us. In order to become an adoptive parent for a Richmond Wildlife Center animal, you must complete our screening requirements, a phone screen, and where applicable a home visit. You will be contacted by phone or email as soon as we have reviewed your application.

Please answer all questions and feel free to explain any answers or add any comments. If a question does not apply, please write N/A.

Name:				
Email Address:				
Address:				
City/State/Zip:				
Home Phone:				
Cell Phone:			_	
Driver License Number:				
I am over 21 years of age	$\square Y \square N$			
Type of Residence HC	OUSE	CONDO	APARTMENT	OTHER
Age of primary caretaker	:			
City or County of Resider	nce :			

Please explain what previous experience you have had with birds?
Do you plan on breeding? yes no  Animal Code Number/Name of bird you are interested in:
Adoption fee per pigeon/dove: \$10.00 Is this an acceptable cost for you? yes no  Why do you want to adopt this bird?  What will you do if the bird decides it dislikes you or another member of the household?
Do any of the members of your household object to adopting a bird?
Is the bird for someone specific in your household?
Does anyone in the household smoke? Yes No
Do you use Teflon coated cookware? Yes No
Are air fresheners, scented candles or perfumes used in the household? Yes No
<ul> <li>Are you aware that:YesNo</li> <li>Birds require a great deal of attention and maintenance?</li> <li>Are very expensive to feed, keep healthy, and keep entertained?</li> <li>Might have or develop undesirable habits (screaming, biting, and destruction of any object in reach, dislike of strangers or your mate, messy, wasteful)?</li> <li>Can be destructive?</li> <li>Can be loud and cause audio disturbances that neighbors may complain about?</li> <li>Require a minimum of an annual visit to the vet for a general check up?</li> </ul>
How many hours a day will the bird be left alone?
When you are away from home, who will care for the bird?
What do you expect from a pet pigeon?
What characteristics are most important to you?
What would the bird's primary diet be?
What is the average life expectancy for the species you are interested in adopting?
Who will be your primary Veterinarian?Are they Avian Board Certified? Yes No

How often will the bird visit the vet?					
Please describe symptoms that may require a veterinary visit:					
Will your bird be bathed regularly? Yes No					
Will you clip the bird's wings to prevent flight? Yes No					
What vaccination and deworming protocol will you use?					
what vaccination and deworming protocol will you use.					
How will you prevent the bird from being injured in your home (chewing on things that coul windows, being injured by objects or other inhabitants, etc.)?					
What size/type of cage/housing will you provide for the bird? (PLEASE ENCLOSE CAGE of PHOTOS):	& ENRICHMENT				
How will you provide activities for the bird when you are away?					
Where will the cage be placed at your home?					
How do you plan to provide for this bird in the event of your death?					
Under what circumstances would you NOT want to keep this bird? (circle all that apply)					
Moving Job status change Allergy New relationship Divorce/Separation Behavior issues Too expensive					
Feather Plucking Does not 'talk' Doesn't like you Serious illness					
Biting or Screaming behaviors Cannot spend enough time with bird					
Neighbor/family complaints Other (explain)					

Please provide us with three bird friendly references (vet, pet store, bird owner, etc)
Name
Relationship
Address
Address PhoneEmail
How long has this person worked with birds?
Name
Relationship
Address
Phone Email
How long has this person worked with birds?
Name
Relationship
Address
PhoneEmail
How long has this person worked with birds?
PLEASE READ BEFORE SIGNING
Please understand that filling out this application does not guarantee approval for adoption. Failure to provide
contact information may void this application. I certify that the information on this application is true and recognize
that any misrepresentation of the facts may lead to the loss of my adoption privileges. I authorize representatives to
verify all information on this application and will allow an in home inspection any time before and after the adoption.
Please take into consideration a pet bird, depending on species, can live 3-60 or more years. You must be prepared to

make this commitment. By signing below, you are indicating that you have never been convicted of animal cruelty,

neglect, or abandonment pursuant to the Code of Virginia § 3.2-6546 D

Printed Name: \_\_\_\_\_\_Signature: \_\_\_\_\_

Date: \_\_\_\_\_