



*Many have forgotten this truth, but you must not forget it.
You remain responsible, forever, for what you have tamed.*

— Antoine de Saint - Exupery

The Gabriel Foundation® is a 501(c)(3) avicultural and veterinary affiliated parrot welfare organization licensed by the state of Colorado, promoting educational outreach, conservation, rescue, rehabilitation, adoption, and sanctuary pertaining to the needs of parrots everywhere.

Email: birds@thegabrielfoundation.org www.thegabrielfoundation.org

Denver Education Center 1025 Acoma Street Denver, Colorado 80204 Phone: 303.629.5900 ext. 216 Fax: 303.646.1351

Aviary & Education Center 39520 County Road 13, Elizabeth, CO 80107

PARROT ACQUISITION CONTRACT (5 PAGES)

Name of Bird _____ Date _____

Species _____ M _____ F _____ D.N.A. Certificate Y ___ N ___

Approximate Age _____ or Date of Hatch _____

Valuation _____

How long with Owner? _____ Previous number of homes? _____

Name of Owner(s) _____ S.S.N. _____

Address _____

City • State • Zip Code _____

Telephone (h) _____ (w) _____ (fax) _____

(E-mail) _____

*Reason for giving up your bird _____

Bird is available for adoption YES NO Bird is in Long Term Foster _____/month

Please check all that apply to your situation:

- | | |
|------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> Not enough time/Change in priorities/
For the bird's best interest | <input type="checkbox"/> Bird too messy, loud or destructive |
| <input type="checkbox"/> Behavior/Biting, noise, aggression | <input type="checkbox"/> Bird's failure to meet expectations |
| <input type="checkbox"/> New spouse/Conflict with relationship | <input type="checkbox"/> Death of Owner |
| <input type="checkbox"/> Owner moving/ Change in living situation | |
| <input type="checkbox"/> Owner's illness/Medical needs | <input type="checkbox"/> Bird's medical needs |
| <input type="checkbox"/> Feather picking/Not attractive | <input type="checkbox"/> Financial Hardship of Owner |
| <input type="checkbox"/> New Baby in household/
Conflict with children | |

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The Gabriel Foundation

TGF CLIENT BIRD HISTORY RECEIVED Y_____ N_____

* If not, please provide a brief history of this bird (Please include previous owners/breeder if applicable)_____

* Behavioral or medical problems (Please be honest, so we can find the best home for your bird)_____

Please continue on reverse side if more space is needed.

How did you learn about The Gabriel Foundation? _____

The Gabriel Foundation (“The Foundation”) is a recognized 501(c)(3) nonprofit corporation dedicated to the rescue, rehabilitation and health of exotic birds through humane education, research, and service. You have asked The Foundation to take ownership and care of the Bird.

Prior to entering The Foundation, all birds must undergo a thorough veterinary examination, the nature of which will vary depending upon the bird’s species. According to our Medical Directors, Jerry LaBonde MS, DVM, and Kris Ahlgrim, DVM, this extremely important procedure will help us to provide for the needs of your bird as well as protect the current flock in residence at The Gabriel Foundation. Parrots often mask their illnesses, and though your bird may “act fine” or has “never been sick” only a medical work up will determine if that is accurate. Birds may pass disease through their feces and oral or nasal discharge to other birds. Parrots also may carry *Chlamydophila psittaci* or avian tuberculosis that is transmissible not only to other birds, but to people too. Our laboratory testing procedure is designed to rule out these diseases. The charges for requisite testing may vary for a complete work up with laboratory testing, but average estimates are:

Canary/Finch	\$75.00
Budgie /Cockatiel	\$100.00
Lovebird	\$125.00
Large Hookbills	\$150.00/\$200.00

You and/or your veterinarian will be provided a copy of The Gabriel Foundation's Avian Medical Screening protocol for all birds prior to admission to The Foundation. We urge you to discuss medical screening costs with your veterinarian prior to testing. As your bird has been in your care and you have been responsible for its welfare during your period of ownership, we request that you underwrite the cost of this exam prior to your bird's admission into quarantine. You will be asked to provide copies of all of your bird's medical records prior to acceptance. Should you prefer to have our Medical Director or one of our attending veterinarians provide the medical screening, a restricted donation on behalf of your bird is encouraged.

We have found that the transition into the aviary for a new arrival is much easier when the bird is surrounded with its familiar belongings. If possible, please provide us your bird's cage, dishes and toys.

The Foundation is asked to accept hundreds of birds annually into the aviary. It is financially and physically impossible to us to do the right thing by our birds without your financial support due to the cost of medical care, caging, toys, foods, flight habitats, staff and the day-to-day business needs of providing for our birds. Your responsibility does not end when your bird is placed with us. We ask that you consider a contribution to offset the care of your bird until the time that we are able to place it into an approved adoptive home. Should your bird come into The Gabriel Foundation for permanent sanctuary, we request that you consider a monthly/annual donation on behalf of the welfare of your bird. Many of the parrots that come into the aviary are from true rescue situations and have not been as fortunate as your bird. Your financial contribution enables us to offset some of the costs incurred with rescue so that we can continue with those efforts.

ف I want to help the Foundation care for my bird.

I am willing to: **(check all that apply)**

Pay for the veterinary exam and necessary laboratory testing for my bird prior to entry to the Foundation

Make a monthly or annual donation of \$ to help the Foundation offset the costs of providing for the total well-being of my parrot. I understand that my bird may be placed into the Foundation's adoption program depending upon the Foundation's evaluation of what is best for the continued welfare of my bird unless I have requested that my bird(s) be placed only in the Sanctuary program and agree to its terms.

ف No, the Foundation cannot count on me to financially assist with the continued welfare of the bird(s) I have relinquished to its care.

Reason (optional): _____

By signing this Parrot Acquisition Contract (the “Contract”), you transfer ownership of the bird described above (the “Bird”) to The Foundation. In addition, you agree to all the terms of this Contract.

If for any reason the Bird is returned to you, you agree to reimburse The Foundation for all expenses of caring for the Bird, such as veterinary care, food, toys, boarding, and overhead expenses.

You warrant to The Foundation that you are the sole owner of the Bird, have the right to transfer its ownership to The Foundation, and that there are no encumbrances on or other ownership interests to the Bird.

You agree to defend, indemnify, and hold harmless The Foundation, its agents, directors, officers, employees, volunteers, and affiliates from and against all actions, claims, damages, losses, and expenses (including reasonable attorneys’ fees) if any of the above warranties are incorrect or incomplete, or if you breach this Contract.

You agree, without additional consideration, to sign, acknowledge, and deliver any other documents and take any other action necessary or appropriate and reasonably requested by The Foundation to carry out the intent and purposes of this Contract.

Colorado law will govern this Contract, and you agree that any litigation arising under this Contract will be brought in a court having jurisdiction within Colorado. In any dispute, the prevailing party shall recover reasonable attorneys’ fees and costs.

MAINTAINING CONTACT

You may decide whether or not you would like to receive updates and information pertaining to your surrendered bird. Please check the appropriate box so that we may respect your wishes.

ف **No** I do not wish to be provided information about my bird(s) placed with The Gabriel Foundation.

ف **Yes**, I would like to continue to receive information concerning the bird(s) I have placed with The Gabriel Foundation. I understand that I may contact the Foundation aviary via telephone, E-mail and by other means as applicable. I understand that it is my responsibility to make inquiries about my bird(s) and that the Foundation staff will provide me updates in a timely manner upon request.

DONATION VALUATION

You may request a donation acknowledgement letter from The Gabriel Foundation for tax purposes when you donate your parrot and/or other items to The Gabriel Foundation, a public charity. The Foundation **will not** provide you with a valuation amount for your donated items; your original purchase receipts for donated items should be provided to your tax planning professional along with a copy of The Gabriel Foundation's donation acknowledgement letter. You may wish to check with your tax advisor regarding your individual tax situation.

ف **Yes**, please provide me with a donation acknowledgement letter for tax purposes. I am donating the following items to The Gabriel Foundation:

_____	_____
_____	_____
_____	_____
_____	_____

ف **No**, do not provide me a donation acknowledgement letter
Please initial and date: _____

I have read this Contract, understand it, and agree to its terms.

Witness signature

Your signature

Witness name (printed)

Your name (printed)

Witness address

Your address

Witness phone number

Your phone number