

Personal Details

Full Name	
Address	
Contact Number	
Email Address	

Do you have other pets in your home?

Y / N

Pet Type	Breed	Age

Are all your pets wormed and vaccinated regularly?

Y / N

Adoption Details

Desired Species	Reason for your choice

Is this animal to be a gift for someone else?

Y / N

Is this animal intended to be a pet for a child?

Y / N

What is the child's age? _____

Do you intend to breed from this animal?

Y / N

By signing this Adoption Form, I acknowledge that I have read and understood the terms and conditions listed in the SOS ILLAWARRA Bird Sanctuary & Rescue Animal Adoption Declaration form. I hereby also declare that the information I have provided is accurate and truthful. I also acknowledge that any intentional dishonesty may result in the rejection of this application or any future applications for avian adoption.

Please Print Name _____

Signed _____

Date _____

Please send your completed Adoption form to illawarrabirdrescue@gmail.com or deliver it directly to **Atlantis Pets, Unit 36, 10 Sylvester Avenue, Unanderra.**

We appreciate your interest in adopting a animal through **SOS ILLAWARRA Bird Sanctuary & Rescue**. Your application will be reviewed, and you can expect to be contacted soon.

☐ ADOPTION APPROVED

☐ ADOPTION DECLINED