



Pet Profile - Bird

Bird's Name: _____ Age/birthday: _____

Type of bird: _____ Color(s): _____ Weight: _____

Veterinarian name: _____ Tel: _____

If your pet looks similar to another, how do you tell them apart? _____

Any health concerns, medicines or food allergies I should know about? Yes No _____

Feeding instructions:

What does your bird eat? _____

Where is the food located? _____

Specific feeding instructions: _____

Treats- please write down any treats, when they are given and procedure _____

Medications, vitamins:

Name: _____ Dosage _____

The bird's drinking water is: Tap Bottled Filtered Other _____

What is the ideal temperature for the bird and how do you regulate it? _____

How often do you normally clean the tray underneath? _____

Procedure for cleaning the cage: _____

Does it require cleaning during our service? Yes No

Do you use a cleaner or antiseptic on the cage? Yes No If yes, name of cleaner and procedure _____

Favorite toy(s), games or words: _____

Does your bird have a specific flock call? _____

Under what conditions does your bird bite? _____

Does your bird come out of the cage? Yes No If yes, describe routine _____

How do you get your bird back in the cage? _____

Do you spray your bird with water? Yes No If yes, location of spray bottle & procedure _____

Check all that apply:

The bird is covered at night Wings are clipped Bird is flighted Lays eggs

TV or radio on during the day TV or radio turned off at night Leave lights: On Off

Other information: _____
