



# BOARDING RESERVATION FORM

## Instructions

- Please complete all information on both pages. **PLEASE PRINT.**
- Please read the Requirements section and sign and date the Authorization.
- Please return to Parrot University, 321 South Polk St. #2C, Pineville NC 28134 or scan and email to [parrots@parrotu.com](mailto:parrots@parrotu.com).
- Upon receipt, we will contact you to confirm your reservation and process your deposit.

## Owner Information

Name \_\_\_\_\_  
Home Phone ( \_\_\_\_ ) - \_\_\_\_\_ Mobile ( \_\_\_\_ ) - \_\_\_\_\_ Work ( \_\_\_\_ ) - \_\_\_\_\_  
Email Address \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Reservation Request

Length of stay (number of nights) \_\_\_\_\_ Number of Birds \_\_\_\_\_ Type of Room: \_\_\_ Private \_\_\_ Communal  
Drop Off Date \_\_\_\_\_ Preferred Drop Off Time \_\_\_\_\_  
Pick Up Date \_\_\_\_\_ Estimated Pick Up Time \_\_\_\_\_

## Requirements and Authorization *(owner signature required with reservation)*

### **No exceptions**

1. Drop off and pick up is by appointment only. Pick up outside of regular store hours is available for an additional fee, depending on staff availability.
2. Bird must be dropped off in carrier. Carrier must stay at Parrot University until bird is picked up.
3. Parrot University will provide cage. Owner must provide perches and toys.
4. Harrison's, Roudybush and fresh foods can be provided. Other food to be provided by owner.
5. Proof of wellness exam within 12 months, by approved veterinarian, must be provided in advance.
6. Proof of psittacosis exam within 12 months, with negative results, must be provided in advance.
7. Proof of current polyoma vaccine required in advance for all birds less than two years old.
8. 25% credit card deposit required upon acceptance of reservation. 48 hour cancellation required. Five day cancellation required for holiday boarding.

**I have read the requirements above. I authorize Parrot University to care for my bird during the dates listed above. In the event that I cannot be reached during a medical emergency, I give permission for stabilizing veterinary care to be provided at my expense.**

\_\_\_\_\_  
*Signature of owner*

\_\_\_\_\_  
*Date*

**PARROT UNIVERSITY BOARDING RESERVATION FORM (page two)**

Owner Last Name \_\_\_\_\_

**Bird Information**

Bird's Name \_\_\_\_\_ Species \_\_\_\_\_

*(If additional birds are boarding, please attach a sheet with all information for all additional birds)*

Gender \_\_\_\_\_ Age \_\_\_\_\_ Where obtained \_\_\_\_\_ When \_\_\_\_\_

Date of last wellness exam \_\_\_\_\_ Veterinarian \_\_\_\_\_

Testing done and results \_\_\_\_\_

Has bird been around any birds that do not reside in your home, within the past 12 months?    \_\_\_ Yes    \_\_\_ No

List all health issues \_\_\_\_\_

Diet \_\_\_\_\_

Special Instructions (medications, nightlight, other preferences) \_\_\_\_\_

**Emergency Contact and Veterinarian Information**

Additional phone where owner can be reached during boarding ( \_\_\_\_\_ ) - \_\_\_\_\_

Avian Veterinarian \_\_\_\_\_ Phone ( \_\_\_\_\_ ) - \_\_\_\_\_

Emergency contact person if owner cannot be reached \_\_\_\_\_

Telephone ( \_\_\_\_\_ ) - \_\_\_\_\_ Relationship \_\_\_\_\_

Emergency contact person is authorized to pick up my bird if I cannot be reached    \_\_\_ Yes    \_\_\_ No

*For internal use only*

Drop Off Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

Parrot University Staff Signature \_\_\_\_\_ Date \_\_\_\_\_

Additional instructions \_\_\_\_\_

Pick Up Owner Signature \_\_\_\_\_ Date \_\_\_\_\_