



**CONNECTICUT PARROT SOCIETY, INC.  
ADOPTION APPLICATION  
(PLEASE PRINT – ONE APPLICATION PER BIRD)**



Submit completed application with **\$25 non-refundable application fee** to  
**CPS, P.O. Box 488, Middletown, CT 06457.** Make checks payable to "CPS".

**ADOPTION AGREEMENT**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Type of Residence: Single Family \_\_\_\_\_ Condominium \_\_\_\_\_  
Apartment \_\_\_\_\_ Other \_\_\_\_\_

Do you have children? Yes \_\_\_\_\_ / No \_\_\_\_\_ Age(s) \_\_\_\_\_

List other pets: \_\_\_\_\_

Have you adopted a pet from another organization? \_\_\_\_\_

Can you quarantine a bird? \_\_\_\_\_

Are you applying for a particular bird? \_\_\_\_\_

Do you have experience with this species? \_\_\_\_\_

Veterinarian (name and town): \_\_\_\_\_

Will this bird be a pet or a breeder? \_\_\_\_\_

Do you have experience as a breeder? \_\_\_\_\_

Are you willing to have a home visit? \_\_\_\_\_

I, \_\_\_\_\_ (print name), hereby submit my application for adoption to the Connecticut Parrot Society (CPS). I have read the CPS Adoption Policies and Procedures, and willingly agree to the terms set forth therein.

I understand that there are inherent risks in owning an exotic bird, and I accept such risks. I fully and solely accept all responsibilities and liabilities associated with owning any bird(s) that I adopt through CPS.

I understand that any bird(s) that I adopt through CPS must remain in my care. In the event that this should become impossible, I agree to return said bird(s) to CPS. I will not transfer ownership of said bird, except through CPS. I will not sell any bird(s) adopted through CPS.

I understand that this application will remain on file at CPS for six (6) months from the date of submission, or until CPS places a bird with me, whichever occurs first.

I certify that I have read and understood this agreement, and that I willingly accept all terms and conditions set forth herein.

\_\_\_\_\_  
Signature Date

*Thank you for your interest.  
CPS is available to help with related questions or concerns.*