



**Liberty Wildlife**  
Rehabilitation | Education | Conservation

**Non-Eagle Feather Repository Program**  
**Application**  
For  
**Non-Eagle Feathers and/or Parts**  
For  
**Native American**  
**Ceremonial and Religious Purposes**

**CONTACT INFORMATION:**

**Address:** Liberty Wildlife  
2600 E. Elwood St.  
Phoenix, AZ 85040

**Phone:** 520-240-7406

**Website:** [www.Libertywildlife.org](http://www.Libertywildlife.org)

**Email:** Feathers@Libertywildlife.org

**Application Requirements:**

1. Feathers are provided for personal ceremonial and religious practices.
2. You must be 18 years old, member of a federally recognized Tribe and provide a copy of your tribal enrollment with your first application.
3. You must mail in a signed original application; faxed or scanned copies will not be accepted.
4. You can only submit one application at a time, once you receive your order, you must wait 3 months before submitting a new application.
5. We cannot ship carcasses to P.O. boxes; a street address and phone number are required.
6. We do not accept correspondence from inmates, a prison authority must submit the application and attach a letter stating the inmate is eligible to receive the number and species of feathers requested and a mailing address.
7. Incomplete or incorrect applications can be rejected without notice.

First Name		Middle Name	Last Name	Suffix or Inmate ID
Organization (Inmates are required to include name of correctional facility)				
Street Address				
City			State	Zip Code
P.O. Box	City		State	Zip Code
Home Ph.	Cell Ph.	Email (Essential for shipment tracking)		
Birth Date	Name of Tribe		Tribal Enrollment No.	
Contact Person and Ph. Number/Extension (Inmates are required to provide a correctional facility contact)				

**You can only order one species per application. Loose feather orders are limited to 20 feathers total, with a limit of 12 tail feathers. Be specific about species and feathers and/or parts being requested.**

<b>Species:</b> First Choice: _____ Second Choice: _____ Third Choice: _____ Comment: _____	<b>Parts of the species requested:</b> Carcass ___ (limit 1) Wings ___ (limit 2) Tail ___ (limit 1) Talons ___ (limit 2) Comment: _____	<b>Feather Details (Type and No., not to exceed 20 total):</b> Adult: ___ Immature: ___ No Preference: ___ Male: ___ Female: ___ Primaries: - Left: # ___ Right: # ___ Total: # ___ Secondary: - Left: # ___ Right: # ___ Total: # ___ Tail Feathers: # ___ Plumes: # ___ Talons: # ___ Comment: _____
---	--	--

**I hereby certify that I am requesting bird feathers and/or parts for personal ceremonial and religious purposes; and that the information submitted herein is complete and accurate.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Repository Use Only:**

Certificate #	The request for feathers has been reviewed and found correct and complete. Initials: _____ Date: _____
---------------	---