



**Liberty Wildlife**  
 Conservation | Education | Rehabilitation | Sustainability

**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 only provided for personal ceremonial and religious practices.
2. You must be 18 years old and a member of a U.S. Federally recognized Tribe.
3. You must attach a photocopy of your tribal enrollment with your first application.
4. You must mail in a signed original application.
5. A faxed, scanned or e-mailed copy will not be accepted.
6. You can only submit one application at a time and request one species per application.
7. After you receive an order, you must wait 3 months before submitting a new application.
8. We cannot ship carcasses to P.O. boxes; a street address, phone number or email are required.
9. Applications from inmates must be approved and submitted by a prison authority.

First Name	Middle Name	Last Name	Suffix or Inmate ID
Organization (Inmates are required to include the full name of correctional facility, no initials)			
Street Address <b>Required for whole carcass orders</b>			
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, Phone Number/Extension, and email. (Inmates are required to provide a prison 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), or Wings ___ (limit 2) Tail ___ (limit 1) Talons ___ (limit 2) Comment: _____	<b>Feather Details (Type &amp; amount – LIMIT of 20 total):</b> Adult: ___ Immature: ___ No Preference: ___ Male: ___ Female: ___ Primaries: - Left: # ___ Right: # ___ Total: # ___ Secondary: - Left: # ___ Right: # ___ Total: # ___ Tail Feathers: # ___ Plumes: # ___ Comment: _____
<b>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.</b> <b>Signature:</b> _____ <b>Date:</b> _____		

**Repository Use Only:**

Certificate #	The request for feathers has been reviewed and found correct and complete. <input type="checkbox"/> Logged out <b>Initials:</b> _____ <b>Date:</b> _____
---------------	---