## Office Pet Policy Consent Form

## **Employee Details**

Name
Email
Department
Pet Details
Type of Pet
Pet Name
Pet Age
Breed
Pet Policy Acknowledgement
☐ I have read and understand the office pet policy.
My pet's vaccinations are up-to-date.
I commit to maintaining cleanliness and control of the pet.
☐ I accept liability for any damages caused by my pet.
Additional Natas or Chasial Instructions
Additional Notes or Special Instructions

Employee Signature		
Date		
Date		