



Liability Waiver for Dogs in the Workplace

CITY OF MISSOULA EMPLOYEE AGREEMENT TO ASSUME SOLE RESPONSIBILITY AND LIABILITY FOR THEIR DOG(S) AT CITY WORK SITES, WAIVING ANY CITY LIABILITY FOR PROPERTY DAMAGE OR PERSONAL INJURY CAUSED BY THE DOG(S) AND HOLDING HARMLESS AND INDEMNIFYING THE CITY.

In consideration of being allowed to bring my dog(s), which I am the legal owner, to City of Missoula work sites, I hereby agree to assume sole responsibility for the conduct of my dog(s); and further agree to be solely responsible for any property damage or personal injury my dog(s) might cause.

I understand the decision to allow a dog in the workplace is at the sole discretion of management and approval may be revoked at any time for any reason, or no reason at all. Any behavior exhibited by a dog in a city work site, which creates a safety concern or disruption to coworkers or anyone using city facilities, will be evaluated by the Human Resources Department. The City in its sole discretion will decide how to handle complaints of concerning behavior with dogs and may result in the dogs removal from city facilities and revocation of this employee agreement.

In addition, I hereby waive all claims, of any nature, which may have been associated with or on account of my dog(s) being present at a City work site. I further agree to indemnify and hold the City of Missoula, its officers, employees, agents, or representatives safe and harmless from any expense for defense, settlement, payment of damages or other activities related to property damage or personal injuries sustained by anyone due to my dog(s) being at a City work site.

I recognize that I am solely responsible for my dog(s) and assume all risks, danger, property damage and personal injury to anyone associated with my dog(s) being present at a City work site. I recognize and agree I am responsible for the conduct of my dog(s) and will ensure my dog(s) conduct is prudent and safe in all manners and activities at all times, while at the City work site.

I further attest my dog(s) are current on their rabies vaccination and have provided the City with a copy of the most recently vaccination record. I will ensure this vaccination remains up-to-date and understand the City may ask for a copy of the record at any time.

DATED THIS _____ DAY of the MONTH _____, 20 _____

Name of dog(s):

SIGNATURE OF CITY EMPLOYEE

DATE

PRINTED NAME OF CITY EMPLOYEE

SIGNATURE OF DEPARTMENT DIRECTOR GRANTING APPROVAL

DATE

PLEASE FORWARD SIGNED WAIVER AND MOST RECENT RABIES VACCINATION RECORDS TO HR.

HR Use Only:

Received by: _____ Date: _____ Vaccinations received: ____ Yes ____ No

Filed By: _____ Date: _____

Complaints or concerns received by the Human Resources Department related to this dog(s).

Received by: _____ Date: _____

Action taken: