**Consent Checklist**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Today’s Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Performer’s Name Performer’s Legal Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Director’s Name Production Company Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Brand/Site Production Title (subject to change)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Production

**Introduction**

The purpose of this checklist is to document the adult performer’s understanding of the activities below and serve as a starting point for a discussion regarding the adult scene they will participate in on the date(s) of production.

All participants maintain the right to refuse any activity, re-negotiate terms or ask for clarification at any time, with no questions asked, regardless of what is contained in this or any other document.

This checklist is not comprehensive and includes space for additions. It is also not an indication that every activity listed will be requested or is applicable to the scene you are booked for. This is a generalized list to help everyone involved in the production understand your boundaries; and to ensure that you feel comfortable on set and with your scene partner(s).

**Definitions**

**Yes:** You understand and are willing to participate in the activity indicated.

**No:** You understand and are NOT willing to participate in this activity.

**Needs Discussion:** You might participate in this activity, but some clarification is required in order to make an informed decision. The level of intensity or the circumstances under which the action occurs are two examples of negotiable points that may be defined on the set, at the relevant time, between the performer, the director, and any other participant. Feel free to use the space provided/back of this page to include comments.

Sexual Activity

|  |  |  |  |
| --- | --- | --- | --- |
| Sexual acts – for your body | Yes | No |  Needs Discussion / Comments |
| Kissing (peck) | ◻ | ◻ |  ◻ |
| Kissing with tongues/open mouth | ◻ | ◻ |  ◻ |
| Cunnilingus (oral sex on women) – eating, licking | ◻ | ◻ |  ◻ |
| Nibbling and/or sucking/pulling labia | ◻ | ◻ |  ◻ |
| Ball/testicle sucking | ◻ | ◻ |  ◻ |
| Blow Job | ◻ | ◻ |  ◻ |
| Deep Throat | ◻ | ◻ |  ◻ |
| Rough face-fucking/thrusting down throat | ◻ | ◻ |  ◻ |
| Vaginal sex | ◻ | ◻ |  ◻ |
|  Fingering (vaginal) | ◻ | ◻ |  ◻ |
|  Penetration with toys (vaginal) | ◻ | ◻ |  ◻ |
|  Fisting (vaginal) | ◻ | ◻ |  ◻ |
| Double vaginal penetration (Two penises in one vagina) | ◻ | ◻ |  ◻ |
| Anal sex | ◻ | ◻ |  ◻ |
|  Fingering (anal) | ◻ | ◻ |  ◻ |
|  Penetration with toys (anal) | ◻ | ◻ |  ◻ |
|  Analingus (rimming/ass licking) | ◻ | ◻ |  ◻ |
|  Fisting (anal) | ◻ | ◻ |  ◻ |
|  Double Penetration (vaginal and anal) | ◻ | ◻ |  ◻ |
|  Double anal penetration | ◻ | ◻ |  ◻ |
|  Gaping asshole  | ◻ | ◻ |  ◻ |
| Ass-to-pussy  | ◻ | ◻ |  ◻ |
| Ass-to-mouth  | ◻ | ◻ |  ◻ |
| Pegging (strap-on harness and dildo) | ◻ | ◻ |  ◻ |
| Forced Masturbation / orgasm | ◻ | ◻ |  ◻ |

|  |  |  |  |
| --- | --- | --- | --- |
| Gestures (Receiving) | Yes | No |  Needs Discussion / Comments |
| Lip Biting / Sucking | ◻ | ◻ |  ◻ |
| Licking face | ◻ | ◻ |  ◻ |
| Licking body | ◻ | ◻ |  ◻ |
| Choking | ◻ | ◻ |  ◻ |
| Hand over mouth | ◻ | ◻ |  ◻ |
| Hair-pulling | ◻ | ◻ |  ◻ |
| Slapping (face) | ◻ | ◻ |  ◻ |
| Slapping (body) | ◻ | ◻ |  ◻ |
| Spanking (Bottom) | ◻ | ◻ |  ◻ |
| Verbal Humiliation/Name-calling. Verbal humiliation as part of role play: are there certain things you would not like to be called? e.g. slut, whore, bitch, piece of meat, etc. | ◻ | ◻ |  ◻ |
| Biting | ◻ | ◻ |  ◻ |
| Nipple pinching | ◻ | ◻ |  ◻ |
| Nipple sucking, nibbling | ◻ | ◻ |  ◻ |
| Squeezing breasts | ◻ | ◻ |  ◻ |
| Scratching back | ◻ | ◻ |  ◻ |
| Digging nails into skin, pinching | ◻ | ◻ |  ◻ |
| Foot on head and/or back | ◻ | ◻ |  ◻ |
| Foot worship | ◻ | ◻ |  ◻ |
| Neck kissing | ◻ | ◻ |  ◻ |
| Hand pulled/pinned behind back | ◻ | ◻ |  ◻ |
| Fishhook mouth with co-star’s finger | ◻ | ◻ |  ◻ |

Accessories/ Props (You may skip this part if toy play is not part of your scene today. Ask director)

|  |  |  |  |
| --- | --- | --- | --- |
| Recipient/Receiving | Yes | No |  Needs Discussion / Comments |
| Blindfolded  | ◻ | ◻ |  ◻ |
| Flogging | ◻ | ◻ |  ◻ |
| Whipping | ◻ | ◻ |  ◻ |
| Caning | ◻ | ◻ |  ◻ |
| Paddling | ◻ | ◻ |  ◻ |
| Ball-gags | ◻ | ◻ |  ◻ |
| Restraints (rope/cuffs/tape) | ◻ | ◻ |  ◻ |
| Clamps | ◻ | ◻ |  ◻ |
| Face covering/hood | ◻ | ◻ |  ◻ |
| Hot Wax | ◻ | ◻ |  ◻ |
| Tickling | ◻ | ◻ |  ◻ |
| Food play | ◻ | ◻ |  ◻ |
| Crawling | ◻ | ◻ |  ◻ |
| Vibrator and dildo play | ◻ | ◻ |  ◻ |
| Cock and ball restraint / torture | ◻ | ◻ |  ◻ |
| Sounding | ◻ | ◻ |  ◻ |

Fluid Exchange

|  |  |  |  |
| --- | --- | --- | --- |
| Spitting (Receiving) | Yes | No |  Needs Discussion / Comments |
| On the face | ◻ | ◻ |  ◻ |
| In the mouth | ◻ | ◻ |  ◻ |
| On breasts/nipples | ◻ | ◻ |  ◻ |
| On the body | ◻ | ◻ |  ◻ |
| On genitals | ◻ | ◻ |  ◻ |

|  |  |  |  |
| --- | --- | --- | --- |
| Squirting / Urine  | Yes | No |  Needs Discussion / Comments |
| Partner making you squirt | ◻ | ◻ |  ◻ |
| Licking/swallowing own squirt | ◻ | ◻ |  ◻ |
| Licking/swallowing squirt of partner | ◻ | ◻ |  ◻ |

|  |  |  |  |
| --- | --- | --- | --- |
| Semen: pop shot location | Yes | No |  Needs Discussion / Comments |
| Facials (avoid eyes) | ◻ | ◻ |  ◻ |
| Facials (inc. eyes and hair) | ◻ | ◻ |  ◻ |
| Semen in mouth (shown on tongue) | ◻ | ◻ |  ◻ |
| Kissing after semen in mouth | ◻ | ◻ |  ◻ |
| Semen in mouth (swallowed) | ◻ | ◻ |  ◻ |
| Semen on genitals (outside) | ◻ | ◻ |  ◻ |
| Breasts | ◻ | ◻ |  ◻ |
| Stomach | ◻ | ◻ |  ◻ |
| Pubic hair | ◻ | ◻ |  ◻ |
| Creampie (vaginal) | ◻ | ◻ |  ◻ |
| Creampie (anal) | ◻ | ◻ |  ◻ |
| Other | ◻ | ◻ |  ◻ |

Marking

|  |  |  |  |
| --- | --- | --- | --- |
| Marking / Bruising  | Yes | No |  Needs Discussion / Comments |
| Do you have a shoot in the next few days? If so, please write NO MARKS in the comments column to your right. | ◻ | ◻ |  ◻ |
| Are you ok with receiving marks that may last a few days? Please write your personal preference in the column to your right.NO MARKS or MARKS ARE OK. | ◻ | ◻ |  ◻ |
| Licking/swallowing squirt of partner | ◻ | ◻ |  ◻ |

Lube Preference

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ◻ Silicone-based | ◻ Water-based | ◻ Coconut oil | ◻ Spit |  ◻ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Additional notes (optional)

Please specify any additional guidelines for participants in shoot:

e.g. sensitive areas, injury, preferences, trigger words, sensitive themes, uncomfortable roles/characters, anything you wish to avoid?

Menstruation (if applies)

Are you on your period?

|  |  |
| --- | --- |
| ◻ | Yes |
| ◻ | No |

If so, are you using a sponge?

|  |  |
| --- | --- |
| ◻ | Yes |
| ◻ | No |

Communicating discomfort

Please choose one safeword*:*

|  |  |
| --- | --- |
| ◻ | I will use the safeword \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| ◻ | I will use the universally recognized safeword “RED” during this shoot |

You can call RED if you just want to communicate that you need water or feel any discomfort, or needing a moment to breathe.

Slow-down word / gesture

|  |  |
| --- | --- |
| ◻ | I will use the word \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| ◻ | Non verbal: I will double tap my partner |

If a performer or crew member says the safeword, all activities stop and action ceases while the scene can be adjusted until the performer can consent to continue.

Signatures

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Performer Legal Name |  | Signature |  | Date |
|  |  |  |  |  |
| Director Legal Name |  | Signature |  | Date |
|  |  |  |  |  |
| Witness Legal Name |  | Signature |  | Date |

Additional Participants / Scene Partners

I affirm that I have read and these limitations thoroughly and will respect them.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Scene Partner Legal Name |  | Signature |  | Date |
|  |  |  |  |  |
| Scene Partner Legal Name |  | Signature |  | Date |
|  |  |  |  |  |
| Scene Partner Legal Name |  | Signature |  | Date |