

SEXUAL ACTIVITY CONSENT AGREEMENT

Today's Date

Performer's Stage Name

Performer's Legal Name

Director's Name

Production Company Name

Brand/Site

Production Title (subject to change)

Date of Production

Affirmation of Age and Voluntariness

I affirm that I am at least 18 years of age and that I am freely and voluntarily participating in the Work described in the Talent Release and Consent Agreement, without coercion, undue influence, or misrepresentation.

Explicit Consent to Sexual Activity

I provide explicit written consent for the purposes of the Work to engage in the specific acts of sexual activity listed below. I have placed my initials next to each act to which I consent. Only those acts initialed below may be performed or recorded as part of the Work.

Please initial only those acts you consent to for the Work. Leave blank any acts you do not consent to.

Sexual Act

Performer Initials

Kissing (peck)

Kissing with tongues/open mouth

Cunnilingus (oral sex on women)—eating, licking

Nibbling and sucking/pulling labia

Ball/testicle sucking

Blow Job

Deep Throat

Sexual Act**Performer Initials**

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

Lip Biting / Sucking

Licking face

Licking body

Choking

Hand over mouth

Hair-pulling

Slapping (face)

Slapping (body)

Sexual Act**Performer Initials**

Spanking (Bottom)

Biting

Nipple pinching

Nipple sucking, nibbling

Squeezing breasts

Scratching back

Digging nails into skin, pinching

Foot on head or back

Foot worship

Neck kissing

Hand pulled/pinned behind back

Fishhook mouth with co-star's finger

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

Sexual Act	Performer Initials
Cock and ball restraint / torture	_____
Sounding	_____
Spitting (Receiving)	
On the face	_____
In the mouth	_____
On breasts/nipples	_____
On the body	_____
On genitals	_____
Squirting / Urine	
Partner making you squirt	_____
Licking/swallowing own squirt	_____
Licking/swallowing squirt of partner	_____
Semen: pop shot location	
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)	_____

By initialing above, I affirm that I have explicitly consented to only those acts marked and that no other acts of sexual activity may be performed or recorded.

Consent to Recording and Use

I understand that the acts of sexual activity to which I have given explicit written consent will be recorded as part of the Work and may be used in accordance with the Talent Release and Consent Agreement.

By signing below, I confirm that this Sexual Activity Consent Agreement is incorporated into and forms part of the Talent Release and Consent Agreement, and that I consent only to the acts I have initialed above.

Date

Performer Signature

Performer Legal Name