**Pre-Shoot Checklist**

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

**Performer Name Director Name**

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

**Production Company Name Brand/Site**

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

**Production Title (subject to change)**

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

**Today’s Date Date(s) 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 during the scene.

**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**

|  |  |  |  |
| --- | --- | --- | --- |
| **Giving/Performing** | **Yes** | **No** |  **Needs Discussion / Comments** |
| Kissing | 🞎 | 🞎 |  🞎 |
| Cunnilingus (pussy licking/eating) | 🞎 | 🞎 |  🞎 |
| Blow Job | 🞎 | 🞎 |  🞎 |
|  Face Fucking / Rough Blow Job | 🞎 | 🞎 |  🞎 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Giving/Performing** | **Yes** | **No** |  **Needs Discussion / Comments** |
| Vaginal sex | 🞎 | 🞎 |  🞎 |
|  Fisting (vaginal) | 🞎 | 🞎 |  🞎 |
| Anal sex | 🞎 | 🞎 |  🞎 |
|  Analingus (rimming/ass licking) | 🞎 | 🞎 |  🞎 |
|  Fisting (anal) | 🞎 | 🞎 |  🞎 |
|  | 🞎 | 🞎 |  🞎 |
|  | 🞎 | 🞎 |  🞎 |
|  | 🞎 | 🞎 |  🞎 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Receiving/Bottoming** | **Yes** | **No** |  **Needs Discussion / Comments** |
| Oral sex | 🞎 | 🞎 |  🞎 |
| Vaginal sex | 🞎 | 🞎 |  🞎 |
|  Fingering (vaginal) | 🞎 | 🞎 |  🞎 |
|  Penetration with toys (vaginal) | 🞎 | 🞎 |  🞎 |
|  Fisting (vaginal) | 🞎 | 🞎 |  🞎 |
|  Double penetration (vaginal) | 🞎 | 🞎 |  🞎 |
| Anal sex | 🞎 | 🞎 |  🞎 |
|  Fingering (anal) | 🞎 | 🞎 |  🞎 |
|  Penetration with toys (anal) | 🞎 | 🞎 |  🞎 |
|  Analingus (rimming/ass licking) | 🞎 | 🞎 |  🞎 |
|  Fisting (anal) | 🞎 | 🞎 |  🞎 |
|  Double penetration (anal) | 🞎 | 🞎 |  🞎 |
| Ass-to-pussy  | 🞎 | 🞎 |  🞎 |
| Ass-to-mouth  | 🞎 | 🞎 |  🞎 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Receiving/Bottoming** | **Yes** | **No** |  **Needs Discussion / Comments** |
| Choking\* | 🞎 | 🞎 |  🞎 |
| Hair-pulling\* | 🞎 | 🞎 |  🞎 |
| Slapping (face)\* | 🞎 | 🞎 |  🞎 |
| Slapping (body)\* | 🞎 | 🞎 |  🞎 |
| Humiliation/Name-calling\* | 🞎 | 🞎 |  🞎 |
|  | 🞎 | 🞎 |  🞎 |
|  | 🞎 | 🞎 |  🞎 |
|  | 🞎 | 🞎 |  🞎 |

*\* any shoot that involves these or other BDSM activities may wish to include the BDSM Checklist Addendum*

**Fluid Exchange**

|  |  |  |  |
| --- | --- | --- | --- |
| **Spitting** | **Yes** | **No** |  **Needs Discussion / Comments** |
| On the body | 🞎 | 🞎 |  🞎 |
| In the face | 🞎 | 🞎 |  🞎 |
| In the mouth | 🞎 | 🞎 |  🞎 |
|  | 🞎 | 🞎 |  🞎 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Semen** | **Yes** | **No** |  **Needs Discussion / Comments** |
| Condoms required | 🞎 | 🞎 |  🞎 |
| Facials | 🞎 | 🞎 |  🞎 |
| Semen in mouth (shown on tongue) | 🞎 | 🞎 |  🞎 |
| Semen in mouth (swallowed) | 🞎 | 🞎 |  🞎 |
| Semen on genitals (outside) | 🞎 | 🞎 |  🞎 |
| Creampie (vaginal) | 🞎 | 🞎 |  🞎 |
| Creampie (anal) | 🞎 | 🞎 |  🞎 |

**Safeword**

*please choose one:*

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

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.

If a performer cannot say their safeword (for instance, because of a gag), they can signal by shaking their head back and forth three times, or looking directly at the director or other crew member.

**Signatures**

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

Performer Signature Date

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

Director Signature Date

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

Witness Signature Date

**Additional Participants**

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

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

Legal name Signature Date

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

Legal name Signature Date

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

Legal name Signature Date