

BDSM Scene Consent Form

Scene-prep tool. Maps activities, hard limits, safewords, and aftercare. Not a substitute for verbal consent during the scene.

Age and Capacity Attestation

- I am at least 18 years old, or the age of majority in the jurisdiction in which I live or reside, whichever is higher.
- I am of sound mind, acting of my own free will, and am legally able to consent to the activities described on this form.
- I understand that this form is a record of consent for an adult production.

Scene Metadata

Production / scene name

Date of scene

City (optional)

Partners

Partners the performer agrees to perform with for this scene (select all that apply).

- Men
- Women
- Trans / non-binary partners
- Any partner the performer has met in person and approved
- Other (specify below)

Other partners — specify

Activity Checklist

For each activity, tick one: Yes, Discuss first, or Hard no. Anything left unselected counts as a hard no by default until discussed.

1. Oral

	Yes	Discuss	Hard no
Oral on vulva	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral on penis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral on anus (rimming)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Deep throat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Face-fucking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Penetrative

	Yes	Discuss	Hard no
Vaginal sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anal sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Double penetration (vaginal + anal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Double anal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fingering (vaginal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fingering (anal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fisting (vaginal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fisting (anal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Toys

	Yes	Discuss	Hard no
Dildos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vibrators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strap-on / pegging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floggers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cock rings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chastity / cages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ball gags	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electro-stimulation toys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other toys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Impact

	Yes	Discuss	Hard no
Spanking (buttocks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Slapping (face)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Slapping (breasts)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Slapping (genitals)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Caning / paddling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Punching (open palm)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Restraint and Bondage

	Yes	Discuss	Hard no
Light bondage (wrists, ankles)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heavy bondage (hogtie, suspension)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Blindfolds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gags	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Collar / leash	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Role-play

	Yes	Discuss	Hard no
Domination / submission roles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Humiliation (verbal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Humiliation (physical)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interrogation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Taboo or consensual non-consent scenarios	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Fluid and Discharge

	Yes	Discuss	Hard no
Squirting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spitting (face)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spitting (genitals)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spitting (body)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
External cumshot (face)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
External cumshot (body)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internal cumshot (vaginal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internal cumshot (anal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Cum swallowing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water sports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Marks and Skin

	Yes	Discuss	Hard no
Visible marks / bruises allowed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visible marks / bruises not allowed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Biting (no marks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Biting (with marks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scratching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nipple pinching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nipple clamps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Breath, Choking, and Edge Play

	Yes	Discuss	Hard no
Choking (light, hands)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Choking (firm)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Choking with implement (rope, collar)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Breath play	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hands in mouth / fish-hook	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Climax Control

	Yes	Discuss	Hard no
Forced orgasm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Orgasm denial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Edging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Squirting on cue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Hard Limits

Activities the performer absolutely will not do under any circumstance, even if they appear on the list above.

Hard limits

Safeword and Check-ins

Safeword (default: 'red')

Slow-down word (optional, e.g. 'yellow')

Check-in cadence (e.g. every fifteen minutes, after each new activity)

Aftercare

What the performer needs after the scene ends — hydration, blankets, quiet time, food, someone present, debrief, transport home.

Aftercare needs

Acknowledgement of Ongoing Consent

| *By signing below, both parties acknowledge each of the following.*

- This form is scene preparation, not a substitute for verbal consent during the scene itself.
- Every person on set retains the right to call the safeword and stop any activity at any time, for any reason or no reason.
- Hard limits are not negotiable mid-scene.
- "Discuss first" items are off the table until both parties have agreed verbally on the day of the scene.
- Nothing in this form is a license to ignore the safeword or to continue after a slow-down word has been called.

Signatures

Performer signature

Date

Director / partner signature

Date