

Explicit Productions FILM Application

(THIS IS A GENERAL INFORMATION APPLICATION. YOUR PERSONAL INFORMATION IS NOT SHARED)

PERSONAL INFORMATION:

PERFORMING NAME		LEGAL NAME		SEX	DATE OF BIRTH		AGE	ORIENTATION	NATIONALITY
ADDRESS			CITY		STATE		COUNTRY	ZIP CODE	PHONE #
EMAIL			SOCIAL		WEBSITE		SMOKE	DRINK	DRUGS
MEASUREMENTS		CUP	BODY TYPE		TATTOOS		PIERCINGS		RACE
EYES	HAIR	HAIR STYLE		HEIGHT/WEIGHT		TRAVEL INT.	Y / N	PASSPORT #	EXP. DATE
						TRAVEL USA	Y / N		

IF YES, PLEASE FILL IN DETAILS INCLUDING DATES

I HAVE BEEN TESTED FOR DISEASES	YES / NO			
I CONSENT TO REGULAR TESTING	YES / NO			
I AM CURRENTLY PREGNANT	YES / NO			
I AM CURRENTLY TAKING BIRTH CONTROL	YES / NO			
MY AGE LIMITS ARE		MINIMUM		MAXIMUM
I CAN PROVIDE MY OWN TRAVEL EXPENSES	YES / NO	INTERNATIONAL / DOMESTIC		
I HAVE A VALID CREDIT CARD	YES / NO			
I CAN SPEAK THE FOLLOWING LANGUAGES				

I AM READY AND WILLING TO WORK WITH THE FOLLOWING PERFORMERS:

SOLO	BISEXUAL MEN	THREESOME MFF	PANSEXUAL
MEN	LESBIAN	GROUPS	INTERRACIAL
WOMEN	LESBIAN GROUP	ORGIES	MACHINES
GANGBANG	THREESOME MMF	TRANSGENDER	OTHER

I CAN'T WAIT TO PERFORM THE FOLLOWING: (MARK BOX WITH A 'X')

UNPROTECTED SEX	UNPROTECTED ORAL	UNPROTECTED ANAL	SEX MULTIPLE TIMES
VAGINAL SEX	ASS LICKING FEMALE	FOOT FETISH	MULTIPLE ORGASM
VAGINAL FINGERING	ASS LICKING MALE	ROLEPLAY	URINATION (GIVE)
VAGINAL TOY SHOW	DEEP THROAT	SLAVE	URINATION (RECEIVE)
ANAL SEX	CUM ON BODY	DOMINATE	URINATION (DRINK)
ANAL FINGERING	CUM ON FACE	STRAP ON TO FEMALE	SCAT/BLOOD PLAY
ANAL TOY SHOW	CUM IN MOUTH	STRAP ON TO MALE	LESBIAN SEX SOFT
ORAL TO FEMALE	CUM INSIDE VAGINAL	STRAP ON RECEIVE	LESBIAN SEX HARD
ORAL TO MALE	CUM INSIDE ANAL	ROUGH SEX	COSPLAY
BALL LICKING	CUM SWAPPING	FACIAL ABUSE	HUMILIATION (GIVE)
BALL KICKING	EXTREME FETISHES	PROSTATE MASSAGE	HUMILIATION (RECEIVE)
INSERTIONS	DOCTOR / PATIENT	SQUIRTING	OTHER (EXPLAIN BELOW)

COMMENTS

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