

Explicit Productions ESCORT 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		SKYPE		WEBSITE		SMOKE	DRINK	DRUGS
MEASUREMENTS		BUST	BODY TYPE	TATTOOS		PIERCINGS		RACE
EYES	HAIR	HAIR STYLE	HIGHT/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 CLIENT AGE LIMITS ARE		MINIMUM	MAXIMUM
HAVE YOU BEEN ARRESTED/CONVICTED	YES / NO	MISDEMEANOR / FELONY	
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 EXCITED TO MEET THE FOLLOWING CLIENTS: (MARK BOX WITH A 'X')

<input type="checkbox"/>	MEN	<input type="checkbox"/>	2 MEN	<input type="checkbox"/>	WHITE	<input type="checkbox"/>	MIDDLE EASTERN
<input type="checkbox"/>	WOMEN	<input type="checkbox"/>	2 MEN GAY/BISEXUAL	<input type="checkbox"/>	BLACK/AFRICAN	<input type="checkbox"/>	EUROPEAN
<input type="checkbox"/>	COUPLES	<input type="checkbox"/>	2 WOMEN	<input type="checkbox"/>	HISPANIC	<input type="checkbox"/>	NATIVE AMERICAN
<input type="checkbox"/>	SOLO SHOWS	<input type="checkbox"/>	2 WOMEN GAY/BISEXUAL	<input type="checkbox"/>	ASIAN/ISLANDER	<input type="checkbox"/>	MIXED RACE

I CAN PROVIDE THESE CLIENTS WITH THE FOLLOWING SERVICES: (MARK BOX WITH A 'X')

<input type="checkbox"/>	UNPROTECTED SEX	<input type="checkbox"/>	UNPROTECTED ORAL	<input type="checkbox"/>	UNPROTECTED ANAL	<input type="checkbox"/>	SEX MULTIPLE TIMES
<input type="checkbox"/>	VAGINAL SEX	<input type="checkbox"/>	ASS LICKING FEMALE	<input type="checkbox"/>	FOOT FETISH	<input type="checkbox"/>	MULTIPLE ORGASM
<input type="checkbox"/>	VAGINAL FINGERING	<input type="checkbox"/>	ASS LICKING MALE	<input type="checkbox"/>	ROLEPLAY	<input type="checkbox"/>	URINATION (GIVE)
<input type="checkbox"/>	VAGINAL TOY SHOW	<input type="checkbox"/>	DEEP THROAT	<input type="checkbox"/>	SLAVE	<input type="checkbox"/>	URINATION (RECEIVE)
<input type="checkbox"/>	ANAL SEX	<input type="checkbox"/>	CUM ON BODY	<input type="checkbox"/>	DOMINATE	<input type="checkbox"/>	HUMILIATION (GIVE)
<input type="checkbox"/>	ANAL FINGERING	<input type="checkbox"/>	CUM ON FACE	<input type="checkbox"/>	STRAP ON TO FEMALE	<input type="checkbox"/>	HUMILIATION (RECEIVE)
<input type="checkbox"/>	ANAL TOY SHOW	<input type="checkbox"/>	CUM IN MOUTH	<input type="checkbox"/>	STRAP ON TO MALE	<input type="checkbox"/>	LESBIAN SEX SOFT
<input type="checkbox"/>	ORAL TO FEMALE	<input type="checkbox"/>	CUM INSIDE VAGINAL	<input type="checkbox"/>	STRAP ON RECEIVE	<input type="checkbox"/>	LESBIAN SEX HARD
<input type="checkbox"/>	ORAL TO MALE	<input type="checkbox"/>	CUM INSIDE ANAL	<input type="checkbox"/>	ROUGH SEX	<input type="checkbox"/>	OTHER (EXPLAIN BELOW)

<input type="checkbox"/>	STRIP TEASE PROFESSIONAL	<input type="checkbox"/>	MASSAGE PROFESSIONAL	<input type="checkbox"/>	CAN BRING A FRIEND (2 GIRL DATE)
<input type="checkbox"/>	STRIP TEASE AMATURE	<input type="checkbox"/>	MASSAGE RELAXATION	<input type="checkbox"/>	LONG DATES / OVERNIGHT
<input type="checkbox"/>	SOLO SQUIRTING	<input type="checkbox"/>	MASSAGE AMATURE	<input type="checkbox"/>	BUSINESS EVENTS
<input type="checkbox"/>	SEX SQUIRTING	<input type="checkbox"/>	MASSAGE PROSTATE (UROLOGICAL)	<input type="checkbox"/>	TOUR GUIDE / TRANSLATOR

COMMENTS

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