

NSIP Layperson Template

For Intimacy Professionals

**For Internal Use Only*



Performer Information

Name:

Union Status:

Character Name:

Call Sheet #:

Performer Representative Information

Representative:

Email:

Phone Number:

Production Information

Production Company:

Production Title:

Season, Episode & Scene #:

Shoot Date(s):

1. Is nudity required?

☐ YES

☐ NO

If yes, what kind of nudity is required?

☐ PARTIAL

☐ IMPLIED

☐ FULL

2. Is simulated sex required?

☐ YES

☐ NO

If yes, what kind of simulation is required?

☐ INTERCOURSE

☐ OUTERCOURSE

3. Has the scene been discussed with the performer?

☐ YES

☐ NO

4. Has the scene been discussed with the performer's representative?

☐ YES

☐ NO

SCENE CONTEXT:

SCENE DESCRIPTION:

DESCRIPTION OF NUDITY/SIMULATED ACTIONS

NUDITY:

SIMULATED INTERCOURSE/OUTER COURSE:

PHYSICAL TOUCH:

KISSING:

OTHER NOTES: