SUBMISSIVE QUESTIONNAIRE

This form will be carefully safeguarded. It will be under my protection and will not be read by absolutely anyone else but me. Your privacy is sacred to me —answer it with total honesty.

If there is information you would rather not say for privacy reasons, simply don't answer.

1. NAME OR NICK :
2. AGE:
3. NATIONALITY:
4. CITY WHERE YOU LIVE:
5. WORK STATUS AND PROFESSION:
6. HEIGHT AND WEIGHT
7. DO YOU EXERCISE OR PLAY SPORTS?
8. SEXUAL ORIENTATION:
9. DO YOU HAVE ANY PHYSICAL LIMITATIONS, CONDITIONS, ALLERGIES, ETC.?
10. WHERE DID YOU FIND MY PROFILE?
11. HOW LONG HAVE YOU BEEN PRACTICING BDSM?
12. DO YOU REGULARLY ATTEND BDSM CLUBS?
13. HAVE YOU EVER BEEN WITH OTHER MISTRESSES?
14. WHAT DO YOU LIKE IN A MISTRESS, AND WHAT DON'T YOU LIKE?
15. WHICH BDSM ACTIVITIES HAVE YOU TRIED SO FAR?
16. WHICH ACTIVITIES DO YOU PREFER?
17. WHICH ACTIVITIES DID YOU FIND LESS ENJOYABLE?
18. WOULD YOU HAVE A PROBLEM IF AFTER A SESSION THERE ARE MARKS IN YOUR BODY?
19. DO YOU NEED TOTAL DISCRETION? COMMENT YOUR SITUATION —CAN YOU RECEIVE MESSAGES AND PHONE CALLS IN YOUR CELL PHONE? CAN YOU BE IN PUBLIC PLACES WITH YOUR MISSTRESS? CAN YOU ATTEND CLUBS?
20. ON A SCALE FROM 1 TO 10, RATE THE LEVEL OF PAIN THAT:
* YOU HAVE EXPERIENCED IN PREVIOUS SESSIONS OR PLAY:
* YOU WOULD LIKE TO EXPERIENCE IN YOUR FIRST SESSION WITH ME:
* YOU WOULD LIKE TO EXPERIENCE IF YOU ARE FEELING CONFIDENT AND EXCITED:

*Keep in mind that 1 means “no pain at all” and 10 would mean the highest level of pain possible in a BDSM session (injuries that do not require medical treatment).*

1. ADDITIONAL COMMENTS - WRITE HERE ANY ADDITIONAL INFORMATION OR CONCERNS THAT YOU CONSIDER RELEVANT FOR OUR SESSIONS.