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## CLIENT CONSENT & RULES TO BE FOLLOWED WAIVER FORM

## **CONTACT INFORMATION**

Client's (Your) Full Name:		
Physical Address:	City:	Zip Code:
Phone Number:	Do you accept text messages (ci	rcle one)? Yes / No
Email Address (optional):	Date of Birth (n	nust be legal age)://
CUDI	DLING SESSION PREFERENCES	
Where do you prefer to meet (check one or mor NOTE: I never hold Cuddling Sessions at my pla		
I think I would like to experience the following d	luring my first session (check all t	hat you desire)
Physical:		
Hugs Hand Holding Light Caressir	ng/Touching Spooning (on t	he couch) Spooning (on the bed)
Non-Physical:		
Talk Watch TV/movies Play Game	es Listen to Music Sing	
I prefer to (check one): Be touched Be		_ An equal amount of touching
Rate how much you prefer Touching over Talkin	g (circle one):	
No Touching / Very Little Touching / Touch H	lalf The Time / Touch More Thar	
My first session will be most likely: 1 hour		hours Overnight

**NOTE:** All your responses above can change from session to session and over time. This survey is just to try and get to know you better on a preliminary basis for your first and potential future sessions.

**DISCLAIMER:** The Professional Cuddling industry is currently non-regulated and no formal or certified training is needed. These non-sexual, cuddling sessions are purely for fun, entertainment and relaxation purposes.

Back side (or page 2) contains the Rules and what is allowable during a Cuddling Companion session.

## RULES (BASICALLY A CODE OF CONDUCT) FOR YOUR CUDDLING SESSION...

- Must be of legal age

Good hygiene by both the client and the cuddler by showering, brushing teeth and clean clothes
· Must not be sick with a contagious flu or virus
All sessions that are not in public are considered private and will remain confidential between client and cuddler
No excessive drinking or any drug use (let's keep it sober and legal)
No kissing or licking (no touching of lips or swapping of any saliva)
No massaging (only light caressing is allowed in the appropriate areas)
No touching any area that would be covered by a swim suit
No sexual activity of any form, groping or strange fetishes
No inappropriate dress such as underwear, lingerie or nudity and the minimal clothing is shorts and a tank top/t-shirt
No undressing in front of each other, by client or cuddler
Any session can be stopped at any time by the client or cuddler
If the client becomes dangerous or is doing illegal things, cuddler may choose to involve the proper authorities
Weapons nor drugs should ever be visible during a session
Client and cuddler must communicate any likes or dislikes and personal boundaries and what makes them feel
comfortable or uncomfortable before, during and/or after a session
Client and cuddler must respect each other at all times
In case client or cuddler becomes aroused both parties must ignore this and not act sexually upon this happening
Minimum session is 1 hour (60 minutes), but overnight stays can also be scheduled
All overhead expenses shall be paid for by you (the client)
For protection of both the client and cuddler, you agree to allow any given session to be recorded on video
NOTE: If you agree to abide by the above rules as laid forth for you (the client) and I (The Cuddling Companion), then please sign and date below. This form will only need to be completed once, but prior to your first Cuddling Session.
hereby agree to abide by the rules set forth on this page on/
Your Signature Date
NOTE: This form must be completed entirely before your first session begins. The waiver protects both you (the client)

**NOTE:** This form must be completed entirely before your first session begins. The waiver protects both you (the client) and I (The Cuddling Companion). Also, all payments must be received prior to the start of you session.