

Club Elation Membership Application

This is a private annual membership club for ages 21 and over only. This membership is solely for meetings of committed married couples, committed unmarried couples, select single females and males for the express purpose of sharing and communicating ideas concerning human relationships expressed through human sensuality and sexuality. All approved members acknowledge, agree and consent to be exposed to and observe conduct consistent with the purpose of the private membership club which will include nudity and adult sexual contact which you as an approved member affirmatively state that the aforementioned conduct and activity is not offensive or lewd within your personal opinion, beliefs, ethics, morality, values and principles.

(Acknowledgement: check this box (Member's initials: _____ / _____)

As a New Member, and upon your first-time arrival, you will be given a brief orientation with our staff. The orientation is to ensure you and / or your significant other understands the basis of the club, and that we make sure you are both aware of the club's rules, protocols and charter. For questions, comments or to provide input, we can be contacted at (888) XOXO-FUN between the hours of 10:00 am to 10:00 pm seven days a week. Should you not reach us, please leave a brief message including your name, telephone number and most convenient time to contact you.

This club's membership application, rules and protocols form will need to be completed and approved prior to you attending any club event meetings. Your annual membership dues will expect to be paid subsequent to our approval of your membership application. Absolutely no persons will be allowed to attend any club event meetings without a completed membership application, application approval, members' rules and protocols form, payment of annual membership dues and member's identification card issuance. Each member's information will be held in the strictest of confidence and will not be shared with any person or entity without legal process.

Upon attendance to your initial club member event meeting a mandatory tour of our facility will be given to you. At the time the tour is completed you will be given an opportunity to ask questions and accept or reject your membership into the club. If you should desire to cancel membership at that time for any reason(s) you will be provided a full refund of your entire annual membership dues and initial member event meeting dues after a maximum fourteen day processing period.

A member's dues for each event meeting will be expected to be paid prior to attendance and is nonrefundable. At the time you attend your initial member meeting and accept membership you will be issued the membership identification card. All members will be expected to have their valid State Identification and Membership Identification card in their possession during all club event meetings. Any lost / missing cards will result in a \$10.00 re-issuance fee. A Member's Identification Card is not considered valid identification without accompanying valid State Identification.

Club Elation reserves the right to revoke any person's membership at any time for any reason(s). Once membership is revoked and / or cancelled you and your significant other will not be allowed to attend and / or participate in any other further event meetings / functions of the club. To reinstate and / or resume membership is the sole discretion of Club Elation staff. No members will be allowed to bring visitors for attendance in any event meeting or attend with any other person(s) not associated with their own membership.

- 1. I / We understand and accept that Club Elation is a private membership club which is not open to the general public.
(Acknowledgement: check this box (Member's initials: _____ / _____)***
- 2. I / We understand and accept that an in-person / telephone call / video phone call interview is required for approval, prior to joining Club Elation.
(Acknowledgement: check this box (Member's initials: _____ / _____)***
- 3. I / We understand and accept that absolutely no illegal drugs, excess amount of prescription drugs, herbal enhancements are permitted on their person or in a member's system, nor are any type or weapons permitted on premises. If staff has reasonable belief that any rule is being violated, permanent termination of membership will be performed and appropriate authorities may be called.
(Acknowledgement: check this box (Member's initials: _____ / _____)***
- 4. I / We understand and accept that drinking alcohol is only permitted indoors and if any member becomes intoxicated, staff will either require the member to stop drinking intoxicants / consuming intoxicants, leave the property for the remainder of the meeting under the control of a sober driver, only. If no sober driver is available a paid transport will be called or the member will be required to rest or sleep-off their intoxication. All paid transport will be at the member's expense, only.
(Acknowledgement: check this box (Member's initials: _____ / _____)***

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5. ***I / We understand and accept that no cameras of any type, no video equipment, no audio equipment, no digital recording / transmitting or other electronic devices are not permitted on the property without prior written and posted permission of Club Elation staff.***
(Acknowledgement: check this box) (Member's initials: _____ / _____)
6. ***I / We understand and accept that there is no tolerance of anyone touching or taking others' possessions without permission. Any member caught stealing any item will be permanently terminated as a member and possibly prosecuted.***
(Acknowledgement: check this box) (Member's initials: _____ / _____)
7. ***I / We understand and accept that cellular phone usage is limited to the 'socializing areas' only and are not permitted in any 'sexual activity areas'. All cellular phones and other communication devices will be checked-in with staff.***
(Acknowledgement: check this box) (Member's initials: _____ / _____)
8. ***I / We understand and accept that no member will relate to any nonmember in any manner whatsoever any information regarding this private membership club, its staff, all members names, all member's personal information, club's charter, club activities or club's schedules without a valid court order.***
(Acknowledgement: check this box) (Member's initials: _____ / _____)
9. ***I / We understand and accept that all members are not allowed to attend any meeting without prior staff approval for each and every event meeting. Last minute approval is acceptable, only when the member(s) phone call Club Elation staff and are given approval.***
(Acknowledgement: check this box) (Member's initials: _____ / _____)
10. ***I / We understand and accept that all memberships are not permitted to be used by anyone other than the issued member. Guests are not allowed.***
(Acknowledgement: check this box) (Member's initials: _____ / _____)
11. ***I / We understand and accept that oral and intercourse sexual activities are not permitted in the 'socializing areas' of the facility.***
(Acknowledgement: check this box) (Member's initials: _____ / _____)
12. ***I / We understand and accept that there will be nudity and sexual activity on premises, but that there is absolutely no club expectation or other members' expectation or requirement to engage in any and / or all type of nudity or sexual activity (ies).***
(Acknowledgement: check this box) (Member's initials: _____ / _____)
13. ***I / We understand and accept that no members are allowed to enter the 'sexual activities areas' without expressed invitation permission of any other approved member(s). No member will remain in the 'sexual activity area' when the inviting member(s) exits these areas. Additionally, no member may enter or remain in 'sexual activities areas' without their significant other or permission from their significant other.***
(Acknowledgement: check this box) (Member's initials: _____ / _____)
14. ***I / We understand and accept that there is absolutely no expectation by any member(s) or from any member(s) for any sexual contact and / or activity (ies) which could be construed as or considered prostitution. Only legal, mutually desired, permitted sexual contact and / or activity are permitted between consenting adults without threat, coercion, and enticement of value or advantage.***
(Acknowledgement: check this box) (Member's initials: _____ / _____)
15. ***I / We understand and accept that only bottled water is permitted in the 'sexual activities areas' of the facility and no glass items are permitted anywhere other than the 'food and drink serving area'.***
(Acknowledgement: check this box) (Member's initials: _____ / _____)
16. ***I / We understand and accept that as an established member you and your significant other will arrive to and depart from the club event meeting at the same time, unless special permission is given by Club Elation staff to do otherwise.***
(Acknowledgement: check this box) (Member's initials: _____ / _____)
17. ***I / We understand and accept that no verbal and / or physical conflicts, member to member arguments, insults, disparagements, domestic quarrels or character assassinations of members or other clubs are tolerated / permitted.***
(Acknowledgement: check this box) (Member's initials: _____ / _____)
18. ***I / We understand and accept that as an established member you are expected to be very encouraging, polite and respectful toward everyone to create 'a genuinely caring and concerned for all members' atmosphere as to create a 'very comfortable and inviting place' members will desire to repeatedly visit.***
(Acknowledgement: check this box) (Member's initials: _____ / _____)

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[For Club Elation Management Eyes Only]

19. ***I / We understand and accept that “No” means ‘No’ the first time it is stated, indicated or shown. All members will not make any further requests of any type. Uninvited touching is never tolerated / permitted. Under the law, any intoxicated person is incapable of consent. Any member engaging or attempting to engage with said intoxicated member will be prosecuted.***
 (Acknowledgement: check this box (Member’s initials: _____ / _____)
20. ***I / We understand and accept that members are expected to exercise good personal grooming, hygiene and sanitary habits. Additionally, members are expected to dress in good and appropriate clothing arriving to, in attendance at and departing the club’s facility. Only casual-dressy, dressy-casual or better clothing is permitted. Expensive and extensive jewelry is highly discouraged.***
 (Acknowledgement: check this box (Member’s initials: _____ / _____)
21. ***I / We understand and accept that any member’s attendance in an event meeting at the designated facility will only be allowed on designated dates indicated and by prior authorization by Club Elation staff of each member’s attendance.***
 (Acknowledgement: check this box (Member’s initials: _____ / _____)
22. ***I / We understand and accept that I / we now and forever more waive claiming any liability on the part of this private membership club, it’s owners, directors, officers, agents, employees and members and hold any and / or all of the aforementioned entity and persons harmless for any injury or loss that may be sustained as a result of association with and / or during attendance at any and / or all event meetings and / or functions, or injury or loss which is due to the sole negligence or intentional acts of this private membership club, it’s owners, directors, officers, agents, employees and members. Your application to become a member of this private membership club constitutes an express agreement with the terms and conditions set forth above and those terms and conditions which may be presented to you in the future as an amendment to this agreement. Any disagreement to any amendment to this membership application will result in the membership suspension or termination.***
 (Acknowledgement: check this box (Member’s initials: _____ / _____)
23. ***I / We understand and accept that any violation of and / or refusal to agree to adhere to all of the stated aforementioned rules, protocol and waiver will result in disapproval of membership and / or immediate and permanent revocation of membership.***
 (Acknowledgement: check this box (Member’s initials: _____ / _____)

By placing upon this document my true printed name and true signature name and the date of which I placed these written items on this document I certify that I have read, understand and agree to all of the aforementioned charter terms, conditions, rules, protocols and policies.

Printed name: _____ Signature: _____ Date: _____

By placing upon this document my true printed name and true signature name and the date of which I placed these written items on this document I certify that I have read, understand and agree to all of the aforementioned charter terms, conditions, rules, protocols and policies.

Printed name: _____ Signature: _____ Date: _____

(Annual membership renewals are due upon date of anniversary of membership)
Bring this entire document (6 of 6 pages) to your first Club Elation event meeting, along with valid State Identification

Married, Unmarried or Single:	Circle one: Married couple membership / Unmarried couple / Single membership
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Female's name:	Last: _____ First: _____ MI: _____
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Date of Birth:	Month: _____ Day: _____ Year: _____
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Valid State Identification:	State: _____ Number: _____ Expiration: _____
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E-mail Address:	E-mail: _____ Receive notification? Y / N
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City & State:	City: _____ State: _____
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Other Club Memberships:	List Clubs: _____
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Lifestyle Website Memberships:	List Sites (<i>circle</i>): TSS / FET / SLS / LL / KAS / CWS / Other (<i>list</i>): _____
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Female's Sexuality:	Circle any (<i>optional</i>): Straight / Bi-curious / Bi-social / Bi-comfortable / Bi-sexual / Lesbian
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<p>Female's Fetishes: (<i>check best applies to you</i>)</p>	<p>Check mark all that apply:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Anal sex (giving / receiving) <input type="checkbox"/> Biting (giving / receiving) <input type="checkbox"/> Bondage (giving / receiving) <input type="checkbox"/> Cum play (giving / receiving) <input type="checkbox"/> Cunnilingus (giving / receiving) <input type="checkbox"/> Clamps (giving / receiving) <input type="checkbox"/> Defilement (giving / receiving) <input type="checkbox"/> Discipline (giving / receiving) <input type="checkbox"/> Dominance (giving / receiving) <input type="checkbox"/> Electricity (giving / receiving) <input type="checkbox"/> Female genitals (giving / receiving) <input type="checkbox"/> Fingering / Fisting (giving / receiving) <input type="checkbox"/> Gang Bang (giving / receiving) <input type="checkbox"/> Glory hole (giving / receiving) <input type="checkbox"/> Golden Showers (giving / receiving) <input type="checkbox"/> Humility (giving / receiving) <input type="checkbox"/> Interracial sex (giving / receiving) <input type="checkbox"/> Lactating breasts (giving / receiving) <input type="checkbox"/> Latex (giving / receiving) <input type="checkbox"/> Leather (giving / receiving) <input type="checkbox"/> Lingerie (giving / receiving) <input type="checkbox"/> Nymphomania (giving / receiving) 	<p>Check mark all that apply:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Male genitals (giving / receiving) <input type="checkbox"/> Masochism (giving / receiving) <input type="checkbox"/> Massage (giving / receiving) <input type="checkbox"/> Masturbation (giving / receiving) <input type="checkbox"/> Multiple oral (giving / receiving) <input type="checkbox"/> Older partner (giving / receiving) <input type="checkbox"/> Oral (giving / receiving) <input type="checkbox"/> Pregnant women (giving / receiving) <input type="checkbox"/> Punishment (giving / receiving) <input type="checkbox"/> Removing / ripping clothes (giving / receiving) <input type="checkbox"/> Roll Playing (giving / receiving) <input type="checkbox"/> Sadism (giving / receiving) <input type="checkbox"/> Scents (giving / receiving) <input type="checkbox"/> Spanking (giving / receiving) <input type="checkbox"/> Squirting (giving / receiving) <input type="checkbox"/> Submissiveness (giving / receiving) <input type="checkbox"/> Textures (giving / receiving) <input type="checkbox"/> Transsexual (giving / receiving) <input type="checkbox"/> Voyeurism (giving / receiving) <input type="checkbox"/> Worship (giving / receiving) <input type="checkbox"/> Younger partner (legal age) (giving / receiving) <input type="checkbox"/> Other _____
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Additional information / comments / suggestions / requests:	
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Male's name:	Last:	First:	MI.:
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Date of Birth:	Month:	Day:	Year:
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Valid State Identification:	State:	Number:	Expiration:
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E-mail Address:	E-mail:	Receive notifications? Y / N
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City & State:	City:	State:
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Other Club Memberships:	List Clubs:
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Lifestyle Website Memberships:	List Sites (<i>circle</i>): TSS / FET / SLS / LL / KAS / CWS / Other (<i>list</i>):
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Male's Sexuality:	Circle any (<i>optional</i>): Straight / Bi-curious / Bi-social / Bi-comfortable / Bi-sexual / Gay
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Male's Fetishes: <i>(check best applies to you)</i>	Check mark all that apply: <ul style="list-style-type: none"> <input type="checkbox"/> Anal sex (giving / receiving) <input type="checkbox"/> Biting (giving / receiving) <input type="checkbox"/> Bondage (giving / receiving) <input type="checkbox"/> Cum play (giving / receiving) <input type="checkbox"/> Cunnilingus (giving / receiving) <input type="checkbox"/> Clamps (giving / receiving) <input type="checkbox"/> Defilement (giving / receiving) <input type="checkbox"/> Discipline (giving / receiving) <input type="checkbox"/> Dominance (giving / receiving) <input type="checkbox"/> Electricity (giving / receiving) <input type="checkbox"/> Female genitals (giving / receiving) <input type="checkbox"/> Fingering / Fisting (giving / receiving) <input type="checkbox"/> Gang Bang (giving / receiving) <input type="checkbox"/> Glory hole (giving / receiving) <input type="checkbox"/> Golden Showers (giving / receiving) <input type="checkbox"/> Humility (giving / receiving) <input type="checkbox"/> Interracial sex (giving / receiving) <input type="checkbox"/> Lactating breasts (giving / receiving) <input type="checkbox"/> Latex (giving / receiving) <input type="checkbox"/> Leather (giving / receiving) <input type="checkbox"/> Lingerie (giving / receiving) <input type="checkbox"/> Nymphomania (giving / receiving) 	Check mark all that apply: <ul style="list-style-type: none"> <input type="checkbox"/> Male genitals (giving / receiving) <input type="checkbox"/> Masochism (giving / receiving) <input type="checkbox"/> Massage (giving / receiving) <input type="checkbox"/> Masturbation (giving / receiving) <input type="checkbox"/> Multiple oral (giving / receiving) <input type="checkbox"/> Older partner (giving / receiving) <input type="checkbox"/> Oral (giving / receiving) <input type="checkbox"/> Pregnant women (giving / receiving) <input type="checkbox"/> Punishment (giving / receiving) <input type="checkbox"/> Removing / ripping clothes (giving / receiving) <input type="checkbox"/> Roll Playing (giving / receiving) <input type="checkbox"/> Sadism (giving / receiving) <input type="checkbox"/> Scents (giving / receiving) <input type="checkbox"/> Spanking (giving / receiving) <input type="checkbox"/> Squirting (giving / receiving) <input type="checkbox"/> Submissiveness (giving / receiving) <input type="checkbox"/> Textures (giving / receiving) <input type="checkbox"/> Transsexual (giving / receiving) <input type="checkbox"/> Voyeurism (giving / receiving) <input type="checkbox"/> Worship (giving / receiving) <input type="checkbox"/> Younger partner (legal age) (giving / receiving) <input type="checkbox"/> Other
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Additional information / comments / suggestions / requests:

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[For Club Elation Management Eyes Only]

Member(s) Lifestyle Level: <i>(check best applies to you)</i>	<input type="checkbox"/> Rating 1: <u>Only verbal and visual involvement with others in the presence of their partner. Nothing other than friendly acquaintanceship is required or desired.</u>
	<input type="checkbox"/> Rating 2: <u>Only watching others sexual conduct and being watched in their own sexual conduct with their partner. Nothing other than friendly acquaintanceship is required or desired.</u>
	<input type="checkbox"/> Rating 3: <u>Will only engage in limited light SENSUAL acts with others such as touching, petting and massage without manual genitalia pleasuring and only in the presence of their partner. Nothing other than friendly acquaintanceship is required or desired.</u>
	<input type="checkbox"/> Rating 4: <u>Will only engage in limited light SEXUAL acts with others which includes oral and manual pleasuring of genitalia but does not include intercourse or other acts which are considered too intimate, personal or infringing. Both partners are present and nothing other than friendly acquaintanceship is required or desired.</u>
	<input type="checkbox"/> Rating 5: <u>Will only engage in limited sexual acts with others such as manual pleasuring of genitalia, oral pleasuring and intercourse with a 'safe sex' condition and no anal sex or other infringing intimacy and only in the presence of their partner. Only friendly acquaintanceship is required but slightly more may or may not be desired.</u>
	<input type="checkbox"/> Rating 6: <u>Will only engage in sexual conduct with others with a 'safe sex' rule and only with both partners present. Only friendly acquaintanceship is required but more closeness may or may not be desired.</u>
	<input type="checkbox"/> Rating 7: <u>Will engage in sexual conduct with others together as partners or separately one on one with the awareness and permission of their partner. 'Safe sex' is generally a requirement for intercourse but may or may not be required for oral stimulation. Only friendly acquaintanceship is required but more closeness may or may not be desired.</u>
	<input type="checkbox"/> Rating 8: <u>Will engage in sexual conduct with others who prefer full swap and is not coy, shy or reluctant to perform in coupled or individual meetings. 'Safe sex' may or may not be required for some sexual conduct. Partners still respect their significant other in informing them and asking for permission. Only friendly acquaintanceship is required but more closeness is likely to be desired.</u>
	<input type="checkbox"/> Rating 9: <u>Will engage in sexual activity readily under most any condition or setting with very few if any limitations, requirements or rules. Partners may or may not require prior awareness of their partner's activity but generally do require readily informing one another of involvement with others. Only friendly acquaintanceship is required but a closer friendship is likely to be desired.</u>
	<input type="checkbox"/> Rating 10: <u>Will engage in sexual activity readily under any condition and setting with no limitations, requirements or rules. Partners generally do not require prior awareness of their partner's activity and may or may not require informing one another of involvement with others. Only friendly acquaintanceship is required but a closer friendship is likely to be desired.</u>

Signature (Male):	
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Date:	
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Signature (Female):	
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Date:	
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FOR STAFF USE ONLY

Membership Status:	(Approved Date):	(Denied Date):
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Member's ID # / Level:	(Membership number):	(Membership Level):
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Member(s) Orientation Given:	Yes / No	If yes, Date:	(Staff Member):
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Membership Expiration:	(Date):
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Membership Revoked or Suspended:	(Date):	(Reason):
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