



**PLEASURES RETREAT ADULT SOCIAL CLUB (the "Club")
MEMBERSHIP FORM**

MEMBER INFORMATION

Full Name:
Address:
Phone:
Email:
Birth Date:
Government issued ID:

By applying for membership in the Club, I agree to be bound by the Membership Rules as attached. I confirm that I am at least 19 years of age as of the date of making this application, and that I am aware that if I am granted membership in the Club, and am invited to attend any Club events, I may be exposed to scenes of nudity, and sexual conduct. I confirm that neither observing nudity or sexual conduct offends me, and that I am aware of the nature of this Club and freely consent to joining this Club.

I am also aware that any breach of the Membership Rules may result in my immediate expulsion from the Club and/or its events.

I HAVE READ THE ABOVE, AS WELL AS THE MEMBERSHIP RULES, AND CONFIRM THAT I BOTH UNDERSTAND AND ACCEPT THE CONTENTS ENTIRELY, AND AM SIGNING WITHOUT DURESS.

NAME OF APPLICANT