



## ***What is IMAS?***

IMAS (Indiana Masters and Slaves/Subs/Switches) is a private organization of individuals who are actively interested in BDSM activities. Upholding, Honor, Integrity, Trust and Honesty above all else, we have founded this organization upon the principals of tolerance, acceptance of diverse lifestyles and practices. We shall continuously strive to provide a safe, supportive, social and educational environment for people interested in alternative lifestyle practices, while differentiating between abusive behavior and the many different expressions of Total Power Exchange (TPE) within a consensual relationship.

Also read the Safe Space Policy and Code of Conduct that should be included with this membership packet.

## ***Are you online?***

Yes. We have a public Yahoo Group accessible at [http://groups.yahoo.com/group/indiana\\_mas\\_group](http://groups.yahoo.com/group/indiana_mas_group)

## ***When do you meet?***

We have business meetings on the 2<sup>nd</sup> Tuesday of the month, and we have discussion munches on the 3<sup>rd</sup> Sunday of the month. See the public Yahoo Group for dates, times, and locations.

## ***How do I become a member of IMAS?***

If you are reading this you likely have a membership application included in the packet. Complete the application and event waiver, enclose the membership dues (\$25 per member), and mail to IMAS or give to an IMAS member. Next compose a brief introduction referring to the suggested format below, and email it to [IMASBoard@yahoo.com](mailto:IMASBoard@yahoo.com). After your application is received, a background check will be performed to make sure you are not listed on any sexual offender registries. Your introduction email will then be posted on the member's only group so people can learn a little bit about you before the next business meeting. At the next business meeting (2<sup>nd</sup> Tuesday of the month) the membership will vote to accept or reject your application.

## ***About yourself ...***

**The following information is voluntary; it is to help the members get to know you better. Please exercise common sense and do not disclose too much personal information. This information should be emailed to [IMASBoard@yahoo.com](mailto:IMASBoard@yahoo.com).**

Scene Name / Nickname (This will be the name on your membership card)

How do you identify yourself (Dom, Top, Master, slave, submissive, etc.)?

Age / Sex / General Location?

Who / Where did you hear about IMAS?

What interested you the most about IMAS?

How long have you been interested in the Lifestyle? \_\_\_\_\_ years. How long have you been active in real life? \_\_\_\_\_ years.

Do you belong to any other Lifestyle groups that you want to mention?

Describe some of the ways you currently practice BDSM?

What if anything would you like to learn more about?

What questions can we answer for you about ourselves / our group?

What else do you want to tell us about yourself?

***IMAS reserves the right to deny any application for any reason.***

# IMAS SAFE SPACE POLICY

Actions that violate the safe space of IMAS include, but are not limited to: threats to or harassment of participants at IMAS meetings or events, on the e-mail lists, or in private; persistently disruptive behavior at IMAS meeting or events, or on the IMAS e-mail lists; violations of the confidentiality of IMAS participants; fighting at any IMAS event; verbal abuse of another member (not during scenes); abuse of any policies set forth in the Code of Conduct; bylaws and violation of any rule set forth by a Dungeon Master at an IMAS event.

In the event that the IMAS board becomes aware, through an eyewitness, verbal. or written complaint of an IMAS member or guest, that the safe space of IMAS is being threatened by an individual, the Board of Officers will conduct an investigation. If a violation is found to exist, the following procedure will be followed:

1. The individual will be informed of his/her behavior by either an Officer of the Board or the Dungeon Master and will, at the discretion of the Board, be given a chance to improve.
2. Violations which may warrant, removal, suspension, revocation, banning, of a member (include but are not limited to): Violation of the Safe Space Policy, Code of Conduct, or DM guide. Additionally, harassment, threats, intimidation, verbal abuse, violence against anyone in the group or at an IMAS function. These can be in any form, IE emails, phone, voicemail, and written or verbal, personally, privately or on any of IMAS' listserves.

## IF THE INDIVIDUAL IS A MEMBER:

1. If the individual persists with his/her threatening behavior, s/he will be ejected from the IMAS meeting or event by either an Officer or a Dungeon Master.
2. The Board of Officers will vote on whether or not to restrict the membership of this individual for a period of up to 60 days. S/he will not be allowed to attend IMAS meetings, events, or participate on the email listserv for that period of time. If the member is an Officer of the Board, the Board can vote (by 2/3 majority) on whether or not to remove this person from office.
3. If the individual persists with his/her threatening behavior upon return to IMAS after the designated period, his/her membership in IMAS may be suspended for an indefinite period of time or revoked, as determined by the Board of Officers. If the member is an Officer of the Board, he is automatically removed from office.

## IF THE INDIVIDUAL IS A GUEST:

1. If the individual persists with his/her threatening behavior, s/he will be ejected from the IMAS meeting or event by either an Officer or a Dungeon Master. S/he will no longer be allowed to attend any IMAS meetings or events.
2. The member who invited the guest will also be ejected from the IMAS meeting or event by either an Officer or a Dungeon Master.
3. The Board of Officers will vote on whether or not to restrict the membership of this member for a period of up to 60 days. S/he will not be allowed to attend IMAS meetings, events, or participate on the email listserv for that period of time.

If there is a dispute about the behavior, the Board of Officers may choose to refer the matter to a Conciliation Panel, which will investigate the matter thoroughly and return a recommendation for action to the Board of Officers. However, investigation by the Conciliation Panel shall not be a prerequisite to action by the board of officers on the restriction, suspension, or revocation of any membership.

The IMAS Board recognizes the seriousness of this procedure and agrees not to initiate this procedure without due cause. Members of the IMAS Board recognize their responsibility to maintain the safe space of IMAS meetings and shall therefore be held to the highest standards of conduct in carrying out their official duties on the IMAS Board.

---

## IMAS CODE OF CONDUCT

### INTERACTIONS WITH OTHERS

- NO means NO. When someone says NO to me, I agree to immediately stop that activity.
- I understand that I can be immediately removed from any IMAS event (at the discretion of the Dungeon Master) if I threaten, intimidate, or engage in fighting with anyone. This includes verbal abuse and harassment.
- I promise not to engage in any flaming or attacking of others based on their viewpoints.
- I agree to avoid gossip about other members. If I have an issue with another member, I agree to take that issue to the Board of Officers, who may choose to refer it to the Conciliation Panel.
- I agree to leave my ego at the door.
- I agree to help others learn and grow in this lifestyle.

### SCENING

- Participants in any scene activity will have safe word(s). I agree to respect safe word(s) when they are used.
- I promise to discuss limits with all parties in a scene prior to engaging in a scene.

### PROTECTION OF SLAVES/SUBS

- I will not touch a slave/sub that does not belong to me without the express permission of that slave/sub's Master.
- I understand that any slave/sub who does not currently have a Master falls under the onus of the Board of Officers, represented by the Dungeon Master and the Officers.

### SWITCHES

If I am a switch, I promise to declare my orientation for each IMAS event (Dominant or submissive) to the Dungeon Master and/or Board of Officers upon entering each IMAS event. I understand that once I have declared my orientation for any particular event, I will be treated accordingly.

### GUESTS

I agree to be responsible for the actions of any guest(s) I invite to any IMAS event. Any violation of any policy by a guest(s) for whom I am responsible will result in the immediate removal of both the guest and myself from the event.

I understand that any guest who violates any IMAS policy will not be allowed to return to any IMAS event in the future.

### FOLLOWING RULES

- As an IMAS Member, I am a representative of our organization and I agree from this point forward to conform to the Code of Conduct in my life, regardless if it is an IMAS event or not.
- I agree to abide by any instructions or rules given by the Dungeon Master, either to the entire membership or to myself specifically.
- If I see any violations of the Safe Space Policy or the Code of Conduct, I promise to immediately inform the Dungeon Master and/or Board of Officers.

*IMAS reserves the right to deny any application for any reason.*



**For IMAS Use Only:**  
 Amt Paid \$ \_\_\_\_\_  
 Check No. \_\_\_\_\_  
 Membership dues for:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

# IMAS Membership Application

This is an official Membership Application for IMAS. The information listed here is strictly confidential and shall not be kept on the premises at any event, or any other location where there is risk of exposure to anyone other than the IMAS Board of Officers. Membership dues must accompany this application. No refunds will be made of dues paid. The completed application and dues can be given to any IMAS member or it can be mailed to: IMAS, P.O. Box 1242, Indianapolis, IN 46206-1242.

\_\_\_\_\_  
 First Name                      Middle Initial                      Last Name                      Scene name / Name on Membership card

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

\_\_\_\_\_  
 Phone Number                      Date of Birth                      Email Address

**BIRTH GENDER**     Male     Female                      **CURRENTLY IDENTIFIES AS**     Male     Female

<p><b>TYPE OF MEMBERSHIP</b>          What level of membership are you applying for? Check one.</p> <p><input type="checkbox"/> Master Level (Male Dominants Only)  <input type="checkbox"/> Female Dominant Level (Female Dominants Only)  <input type="checkbox"/> General (slaves/submissives/switches, any sex)</p>	<p><b>ORIENTATION</b>          Check one.</p> <p><input type="checkbox"/> Master (Male)                      <input type="checkbox"/> switch (Male)  <input type="checkbox"/> Dominant (Male)                      <input type="checkbox"/> switch (Female)  <input type="checkbox"/> Dominant (Female)                      <input type="checkbox"/> slave/submissive (any sex)</p>
---	--

**EMERGENCY CONTACT**

Please note that this information will be used ONLY in the case of a medical emergency, where we have need to contact someone to let them know you have been taken for treatment. This does not need to be a family member, just someone who knows your family, and will be able to contact them to let them know of the emergency.

\_\_\_\_\_  
 Emergency Contact                      Emergency Phone Number                      Relationship

**ALLERGIES/MEDICAL INFORMATION**

Do you have any allergies or medical information that should be shared with us to ensure safe play at special IMAS events? \_\_\_\_\_

**SIGNATURE**

I understand that my application will be subjected to an informal background check, for sex offenders or predators. By signing below, I state that I do not have any felony convictions for any sexually-based offenses, nor for any forceful offenses, such as (but not limited to) pedophilia, sexual abuse of any kind, attack with a weapon, or kidnapping. I state that the above information is true and accurate to the best of my knowledge.

\_\_\_\_\_  
 Applicant Signature                      Date

\_\_\_\_\_  
 IMAS Sponsor/Witness                      Date

\_\_\_\_\_  
 IMAS Sponsor/Witness                      Date

*Application handed out by:* \_\_\_\_\_ *on* \_\_\_/\_\_\_/\_\_\_

*IMAS reserves the right to deny any application for any reason.*



# IMAS EVENT WAIVER

I, the undersigned, agree to save harmless, IMAS, its officers and organizers, its affiliates, and other fellow participants from any liability pursuant to any physical, emotional, psychological or legal injury which may occur during participation in any IMAS-sponsored event.

I, the undersigned, understand that adult-oriented discussions, activities, and demonstrations may occur and I am not offended by such. I understand that there may be nudity and I am not offended by such. I state that my attendance and/or participation are voluntary and understand that I may leave at any time.

I, the undersigned, am at least 18 years of age or older, and am legally capable of participation in adult-oriented activities and will provide proof of age upon request.

I, the undersigned, understand that activities may occur during IMAS-sponsored functions that may pose physical and/or psychological risks for some individuals. It is my responsibility to make known any medical and/or psychological conditions I have that may have a bearing upon my participation in these activities or which may create a medical emergency.

I, the undersigned, agree that everything that I observe at any IMAS-sponsored function will be kept in strict confidence, and that I will do nothing to jeopardize the privacy and identities of the other attendees unless I have the expressed written permission of the IMAS Officers and have signed the appropriate waivers.

I, the undersigned, agree to not create any audio or video recordings, take photographs, or record the activities of other members. I agree that any audio or video recordings, photographs, or other records produced at any IMAS-sponsored function without expressed written permission of IMAS-authorized agents are the sole property of IMAS, regardless of their creator. If I am the creator of said materials, then I agree to transfer all copyrights of these materials to IMAS immediately with my signature below.

I, the undersigned, agree to leave any IMAS-sponsored function voluntarily, with forfeiture of admission fees, upon just cause, at the request of an Officer of IMAS, a Dungeon Master, or other designated IMAS representative.

**JUST CAUSE INCLUDES**, but is not limited to:

\*Violation of the general rules of IMAS, including disruptive and/or destructive behavior.

\*Violation of the IMAS Code of Conduct or Safe Space Policy.

\*Failure to respond to safe words or safe signals, or failure to respect the limits of behavior set by other individuals for themselves.

\*Being deemed "under the influence of" or use of recreational drugs or illegal substances IS ILLEGAL and shall not be tolerated.

\*Anyone under the age of 21 being deemed "under the influence of" or use of alcohol IS ILLEGAL and shall not be tolerated.

\*Prostitution, solicitation and negotiation for compensation for services ARE ILLEGAL and shall not be tolerated.

I, the undersigned, realize the above rules are necessary to insure IMAS-sponsored functions remain within the legal statutes of our area, and remain voluntarily safe, sane and consensual for the enjoyment of all participants. I realize that IMAS function participants are conducting risk-aware consensual kink.

I, the undersigned, have read, understand and agree to follow all the above statements, as well as the IMAS Safe Space Policy and Code of Conduct. My signature also indicates that I am not here in any official capacity of law enforcement officer, hired investigator, journalist, postal service agent or government employee.

---

Signature

Printed Name

Date

---

IMAS Witness Signature

Printed Name

Date

***IMAS reserves the right to deny any application for any reason.***