



Snice Content Consent Form

Player: _____

GM: _____

To ensure that everyone feels welcome and doesn't have to go through anything uncomfortable that could have been already taken into consideration beforehand, this consent form helps to communicate possible trauma or triggers of the players.

Please mark all listed entries with an X in either the + (Okay with this) or - (Not okay with this) box.

Concepts

	+	-
Psychological terror	<input type="checkbox"/>	<input type="checkbox"/>
Scary themes	<input type="checkbox"/>	<input type="checkbox"/>
Murder	<input type="checkbox"/>	<input type="checkbox"/>
Real-world religious themes	<input type="checkbox"/>	<input type="checkbox"/>
Slasher themes	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

Mental Health

	+	-
Childhood trauma (Ex: Abuse)	<input type="checkbox"/>	<input type="checkbox"/>
Gaslighting	<input type="checkbox"/>	<input type="checkbox"/>
Claustrophobia	<input type="checkbox"/>	<input type="checkbox"/>
PTSD, CPTSD, etc.	<input type="checkbox"/>	<input type="checkbox"/>
Dereali- / Depersonalization	<input type="checkbox"/>	<input type="checkbox"/>
Mental Disabilities	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

Horror

	+	-
Graphic blood	<input type="checkbox"/>	<input type="checkbox"/>
Cannibalism	<input type="checkbox"/>	<input type="checkbox"/>
Bugs & other crawling things	<input type="checkbox"/>	<input type="checkbox"/>
Harm to animals or children	<input type="checkbox"/>	<input type="checkbox"/>
Demons	<input type="checkbox"/>	<input type="checkbox"/>
Disfigured creatures / people	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

Body Horror

	+	-
Physical torture	<input type="checkbox"/>	<input type="checkbox"/>
Selfharm	<input type="checkbox"/>	<input type="checkbox"/>
Mutilation	<input type="checkbox"/>	<input type="checkbox"/>
Excessive Gore	<input type="checkbox"/>	<input type="checkbox"/>
Organs in general	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

Physical Health

	+	-
Terminal illnesses	<input type="checkbox"/>	<input type="checkbox"/>
Burning or freezing alive	<input type="checkbox"/>	<input type="checkbox"/>
(Sexual-) Assault	<input type="checkbox"/>	<input type="checkbox"/>
Starvation	<input type="checkbox"/>	<input type="checkbox"/>
Exceptionally big injuries	<input type="checkbox"/>	<input type="checkbox"/>
Paralysis	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

Social Issues

	+	-
Racism	<input type="checkbox"/>	<input type="checkbox"/>
Sexism	<input type="checkbox"/>	<input type="checkbox"/>
LGBTQ+ - Phobia	<input type="checkbox"/>	<input type="checkbox"/>
Police brutality	<input type="checkbox"/>	<input type="checkbox"/>
Ableism	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>