



Arkansas

STATE BOARD OF MASSAGE THERAPY

PO Box 2019
Little Rock, AR 72203
Phone: (501) 683-1448
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2010 – 2012 Renewal

Massage Therapist License Renewal (LMT, MMT, MTI)

This form must be completed entirely and submitted with your payment postmarked by the last day of the month preceding your birth date. Incomplete renewals will not be processed and may be returned for completion and subject to late penalty fees. Renewals postmarked after the first day of the month preceding your birth date are late (expired) and may be subject to late penalty fees. Payment must be made by **Cashier's Check or Money Order Only, payable to ASBMT.**

Type or print legibly

		License Type	License Number
Name (First, Middle, Last)		Date of Birth	Last 4 Digits SSN
Home Phone	Cell Phone	Email	
Mailing Address			
City	State	Zip	County
Physical Address (if different than Mailing Address) Suite/Apt			
City	State	Zip	County
Place of Employment		Business Phone	
Business Address Suite/Apt			

ARKANSAS STATE BOARD OF MASSAGE THERAPY
2010 – 2012 Massage Therapist License Renewal
Professional Licensure History – Please Check

A) Since your last renewal have you been refused a license of certification to practice massage, or any other license or certification, or the renewal thereof, in any state or jurisdiction? Yes No

B) Since your last renewal have you had a license or certification of registration to practice massage or any other licensed profession revoked, denied, restricted, suspended or otherwise acted against (including probation, fine, reprimand or surrender license) in a disciplinary proceeding in any state, federal or foreign authority; or have you ever surrendered such credential to avoid or in connection with such action by such authority? Yes No

C) Since your last renewal have you been convicted of or found guilty of or entered a plea of guilty or nolo contendere to any offense that would constitute a felony or constitute the offense of prostitution, either in this state or the United States? Yes No

Your current license status is: Active Inactive Expired

****Note: Inactive Status requested MUST be postmarked on or before the last day of the month preceding your birth date. All requests for inactive status postmarked after that date will be denied.***

FOR ACTIVE STATUS
<input type="checkbox"/> Complete Renewal Form
<input type="checkbox"/> CEU Certificate 18 hours
<input type="checkbox"/> Copy of Previous License
<input type="checkbox"/> License Fee - \$80.00

FOR INACTIVE STATUS
<input type="checkbox"/> Complete Renewal Form
<input type="checkbox"/> Copy of Previous License
<input type="checkbox"/> License Fee - \$80.00

FOR EXPIRED STATUS
Expired licenses can no longer be renewed. Application must be made for a new license, and all current requirements must be met.

- All CEU's must be ASBMT approved
- **Cashier's Check or Money Order ONLY**
- Questions? Please call 501-683-1448
- Additional information can be found on our website www.arkansasmassagetherapy.com

By my signature below, I certify that all information is true, accurate and complete to the best of my knowledge. I understand that providing incomplete or inaccurate information will result in a delay of my renewal and may result in penalty fees and/or disciplinary action by the Board.

Signature

Date