



**LOUISIANA BOARD OF MASSAGE THERAPY**  
2645 O'Neal Lane, Bldg. C, Ste. E ♣ Baton Rouge, LA 70816  
225-756-3488 ♣ [www.labmt.org](http://www.labmt.org)

**Establishment License Renewal Form**

**Cashier's Checks or Money Orders Only - No Personal or Business Checks Accepted**

**RENEWAL FEE: \$100.00**

**LATE FEE: \$100.00 (postmarked after March 31<sup>st</sup>)**

All locations where therapists regularly engage in the practice of massage therapy shall register with the board as a massage establishment. All locations where more than one therapist is regularly engaged in the practice of massage therapy shall be required to register as a massage establishment and pay an establishment license fee.

**Please Print or Type Information on Form.** All items must be completed on this form and it must be signed and dated. All incomplete applications and/or packages will be returned.

1. **Name of Establishment:** \_\_\_\_\_

**Establishment Number:** \_\_\_\_\_

**Phone :**( \_\_\_\_ ) \_\_\_\_\_ **Fax:**( \_\_\_\_ ) \_\_\_\_\_

**Email:** \_\_\_\_\_

**Business Physical Address:** \_\_\_\_\_  
Street Number and Name Suite #

\_\_\_\_\_  
City State Zip

**Mailing Address:** (If different from Business Physical Address)

\_\_\_\_\_

2. **Tax ID Number:** \_\_\_\_\_

3. **Name of Owner or Legal Agent:** \_\_\_\_\_

List all LICENSED MASSAGE THERAPIST employed at this specific Establishment  
(Use additional sheet, if needed)

1. \_\_\_\_\_  
Therapist Name as listed on license LA License Number

2. \_\_\_\_\_  
Therapist Name as listed on license LA License Number

3. \_\_\_\_\_  
Therapist Name as listed on license LA License Number

- 4. \_\_\_\_\_  
Therapist Name as listed on license LA License Number
- 5. \_\_\_\_\_  
Therapist Name as listed on license LA License Number
- 6. \_\_\_\_\_  
Therapist Name as listed on license LA License Number

Note: Each therapist working at your location must present to you a license that includes your establishment’s physical address or the Licensed Massage Therapist Identification Card to display publicly as required by law. Public posting shall be done in accordance with the following:

Title 46:XLIV, Chapter 33, §3301(A), which states: A. Each licensed massage therapist shall publicly display his license. In addition, each massage establishment shall post, in plain sight, its establishment license and the license of each massage therapist who practices in the massage establishment. Each massage therapist must have his Licensed Massage Therapist Identification Card (LMT-ID) in his possession while providing massage therapy for a client.

**In accordance with Title 46 Professional and Occupational Standards Part XLIV. Massage Therapists Chapter 29. Notification to board of Change of Status §2901. Name, Ownership and/or Location Changes**

A. All name, location and/or ownership changes of licensure must be reported in writing to the board within 30 days of occurrence using a form provided by the board.

The undersigned certifies to be the owner or legal agent of the establishment named in this application and that they have read and understand the application and that all information provided is true and correct.

\_\_\_\_\_  
Signature of Owner or Legal Agent Date