

**Louisiana State Board of Massage Therapy**  
**RENEWAL INSTRUCTIONS**

1. **Processing Time** - Renewals can be completed **online or by mailing** the application to the office for processing. For faster processing it is recommended that licenses are renewed online. All renewals will be processed in the order in which received. Any renewal receive the last week of renewal season may take up to 5 (five) days to process. **It is advised that licensees submit their renewal no later than five days prior to March 31<sup>st</sup>. This will allow ample time for corrections if the application is denied.**
  
2. **Renewals, Continuing Education (C.E.U's) & Working Establishment:** Each license expires March 31<sup>st</sup> each year regardless of when the initial registration was completed. First year applicants are **not** required to take CEU's their first year but must renew regardless of when the initial registration was received. Upload a typed of hand written paper that indicates "First year of licensure – no CEU's required"
  - a. It is the Licensees responsibility to **only take Louisiana State Approved** continuing education as shown on the LABMT website and the **certificates submitted have the required approved LCEU#** on the certificate. If the provider did not put the LCEU# on the certificate you may contact the provider and write the number on the certificate. Do not assume your CEU is approved unless verified on the LBMT website. This includes association continuing education such as the AMTA, ABMP or FSMTB. Each course must be registered with the board by the provider and approved. For more information please visit the Notes/Reminder page on the LBMT website
  - b. **CEU Transcripts will not be accepted** unless they include the LCEU course number. (Example, association transcripts of all courses taken) Certificates of completion must be uploaded.
  - c. **Extensions & Waivers** - Based on the law, no extensions or waivers can be given in regards to renewals regardless of the circumstances. Each Licensed Massage Therapist has 3 months to renew their professional license between January 1<sup>st</sup> and March 31<sup>st</sup>.
  - d. **Carry Over CEU hours** - Any excess CEU's beyond the required 12 taken the prior renewal year, can be carried over for ONE renewal cycle. For example; If you took a course that was submitted last year for 24 CEU's, 12 of those CEU's will carry over to the next renewal cycle only. The excess of CEU's only apply to the course submitted the prior renewal season on record. It is the responsibility of the licensee to re-submit the certificate from the previous year for the current renewal season for verification
  - e. **Establishments & Solo Practitioner Registrations** - No massage therapist shall work at an establishment that is not licensed by the Board. Establishment License and Solo Practitioner Registration number(s) are required for renewal. It is the therapist responsibility to ensure this information is provided and they are working at a registered Establishment or registered as a Solo Practitioner. Therapist who work from their home or offer Mobile Massage are NOT required to register as a Solo Practitioner. Please review the FAQ page under Massage Establishments on the LBMT website for clarification. Massage establishments shall NOT include working in a physician's office, physical therapy facility, chiropractic office or higher education sports facility.
  
2. **Notifications/Status updates**

During the renewal process email notifications will be sent to the email address on file with status updates.

**Received:** Indicates that your application was received only. This email does not mean your application was approved.

**Approved:** Indicates that your license was successfully renewed and available to print from your dashboard. **Denied:** Indicates that there were issues with your renewal. In most cases this means not all certificates were uploaded, the CEU's taken were **not** approved or the establishment listed is not licensed. For this reason, it is advised that licensees submit their renewals five days prior to March 31<sup>st</sup> so ample time will be available to make any correction and avoid the \$100.00 late fee.
  
3. **Responsibility of each licensee**

It is the sole responsibility of the licensee to verify each status of the renewal process. If you ~~do not receive~~ the initial email indicating your renewal was "received" first check your junk/spam folder then email [info@labmt.org](mailto:info@labmt.org) to confirm receipt. **Any denied renewal submitted that is not corrected by March 31<sup>st</sup> will require a \$100.00 late fee.** Please submit your renewal at least 5 days prior to the deadline of March 31<sup>st</sup>.



Louisiana Board of Massage Therapy  
 9619 Interline Ave  
 Suite B  
 Baton Rouge, LA 70809  
 225-756-3488  
 www.labmt.org  
 Questions: [info@labmt.org](mailto:info@labmt.org)

Louisiana **Professional License Renewal**  
**Renewal Fee: \$125.00**  
**Cashier's Check or Money Order Only – Payable to LBMT**  
**Late Fee: \$100.00 if received or postmarked after March 31st**

Date		License #	
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Are you currently living out of state and NOT practicing in Louisiana.      YES      NO

**Contact Information: Home address only must be a place of residence, cannot be a place of business or PO Box**

First		Last	
Street			Suite/Apt#
City	State	Zip	
Email			Phone Number

**Mailing Address:**

Street			
Suite/Apt#	City		
State	Zip		

**Name of Professional Location #1**

If you have no other address were you are working, please put your home address in this box.

**Home** (P.O. Box will not be accepted)      Hide this location from searches      Yes      No

Street			
Suite/Apt#	City		
State	Zip		

**Professional Location #2**

Establishment Name			Establishment #		
Establishment Address					
Suite #	City	State	Zip		
Business Phone					

**Professional Location #3**

<b>Establishment Name</b>					<b>Establishment #</b>			
<b>Establishment Address</b>								
<b>Suite #</b>		<b>City</b>		<b>State</b>		<b>Zip</b>		
<b>Business Phone</b>								

**Professional Location #4**

<b>Establishment Name</b>					<b>Establishment #</b>			
<b>Establishment Address</b>								
<b>Suite #</b>		<b>City</b>		<b>State</b>		<b>Zip</b>		
<b>Business Phone</b>								

**Professional Location #5**

<b>Establishment Name</b>					<b>Establishment #</b>			
<b>Establishment Address</b>								
<b>Suite #</b>		<b>City</b>		<b>State</b>		<b>Zip</b>		
<b>Business Phone</b>								

**Do you have a trial pending, or have you ever been convicted, plead guilty or no contest to:**

- a) Any type of felony: **Yes** **No**
- b) Any type of sexually related misdemeanor: **Yes** **No**
- c) **If “Yes”** provide details on a separate sheet and submit any relevant documents (court pleadings, arrest records, etc.) to be reviewed. Not providing this information will delay processing.
- d) Have you ever been refused, revoked, suspended, encumbered or otherwise restricted any professional license by any state?

**Yes No If “Yes”** what were the circumstances, please explain:

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**I am a first year applicant and not required to take CEU’s until the next renewal cycle YES NO**

**I have carry over CEU’s taken on or after April 1<sup>st</sup>, 2022 which I have attached YES NO**

**I certify that:**

**By agreeing to renew your license you verify that you have read the above instructions and understand that any incorrect and or incomplete renewal application will be returned along with the renewal fee. You also understand that if corrections are not made by March 31<sup>st</sup> the \$100.00 late fee will apply.**

I have confirmed my CEU's are approved by the Board and my certificate contains the approved LCEU#. If the provider did not put the LCEU# on the certificate you may contact the provider for the number and write the course number on the certificate. If the provider is unable to provide the LCEU# the course may not be approved.

Registrant also confirms to obey the laws, rules and standards of this state and maintain the honor and dignity of the profession Registrant further confirms that all of the statements and representations contained in the registration are true and correct and understands that if any such statement and/or representations are found to be false it shall be a basis to have the license suspended or revoked by the Louisiana Board of Massage Therapy at any time. Applicant further acknowledges that responsibility to keep applicant's licensure current and stay informed of any changes in the law, rules and regulations and policy relative to the practice of Massage Therapy in the state of Louisiana.

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_