



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

Louisiana Professional License Renewal Application

NOTICE

1. Renewals & Continuing Education (C.E.U's)

Renewals can be completed **online or by mailing** the application to the office for processing. First year applicants are **not** required to take CEU's their first year but must renew regardless of when the initial registration was received. It is the Licensees responsibility to only take Louisiana State Approved continuing education as shown on the LABMT website and that certificates submitted have the required approved **LCEU#** on the certificate. Each license expires March 31st each year regardless of when the initial registration was completed.

a. Carry Over CEU hours

Any CEU's beyond the required 12 taken **on or after April 1st, 2022** can be carried over for ONE renewal cycle. For example, if 24 CEU's were taken between April 1st, 2022 and March 31st, 2023, 12 of the extra CEU's can carry over to the next renewal cycle. **It is the responsibility of the licensee to submit the carry over CEU's for the next renewal cycle.**

2. Extensions & Waivers

It is the Board's stance that based on the law, that NO EXTENSIONS or WAIVERS be given in regards to renewals regardless of the circumstances. Each Licensed Massage Therapist has 3 months to renew their professional license between January 1st and March 31st, this is ample time to renew your license. **It is advised that licensees submit their renewal no later than 72 hours prior to March 31st.**

3. 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 or the CEU's taken were **not** approved by the board and will need to be completed correctly.

For this reason, it is advised that licensees submit their renewals no later than 72 hours prior to March 31st so ample time will be available to make any correction and avoid the \$100.00 late fee.

4. 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 to confirm receipt. **Any denied renewal submitted that is not corrected by March 31st will require a \$100.00 late fee.** Please submit your renewal at least 72 hours prior to the deadline of March 31st.

5. Office Hours and Documentation Processing

All documents are processed in the order received. We will gladly accept renewals at the office during HOURS OPEN TO THE PUBLIC, these hours are located on our website www.labmt.org. It is highly recommended to call the office first to ensure the office is not closed for board meetings, hearings etc. All documents are processed **IN THE ORDER RECEIVED**. For this reason, the office **CANNOT PROCESS OR REVIEW DOCUMENTS FOR ACCURACY WHILE YOU WAIT**. It is advised that renewals be done online or mailed to the office. **HAND DELIVERING RENEWALS WILL NOT EXPEDITE PROCESSING**. Completing applications correctly lies solely on the licensee listed. Make copies for your records. **The office cannot make copies if hand delivered or mailed unless a money order is received in the amount of .25 cents per page.** Please call or email the office should you have any questions, we are happy to assist.



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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

To renew online visit LABMT.Org

Questions: info@labmt.org

Date	
License Number	

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: Use address listed above YES

Street					
Suite/Apt#		City			
State			Zip		

Name of Professional Location #1

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

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

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

Professional Location #4

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

Professional Location #5

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

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

I have verified that the certificates attached are approved by the LABMT as shown on the website YES

I have enclosed the requires 12 CEU's for the current renewal cycle taken on or after April 1st, 2022 YES

I certify that:

Registrant 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: _____