



## APPLICATION FOR MEMBERSHIP

Date:

Name:

Address:

Phone:

Fax:

Email:

Name and Address of School/Training Facility you attended: \_\_\_\_\_

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Documentation required:

- \_ Copy of Massage Therapy Diploma
- \_ Copy of Official School Transcript (mailed direct from school)
- \_ Proof of successful completion of Board Exam
- \_ Proof of valid CPR/First Aid Certification (Basic level)
- \_ Up-to-date Resume
- \_ 3 Reference Letters: Academic, Professional and Personal
- \_ \$25 Application Fee

If applying from another Massage Therapy Association:

- \_ Proof of Membership, including date joined
- \_ Proof of up-to-date CEUs (ie copy of most recent CEU report)

Please send your complete application to:

PEIMTA, Attn: Registrar  
PO Box 1882, Charlottetown, PE C1A 7N5  
Fax: 902-368-7281

**Application Processing and Notification:** Once your application has been reviewed, you will be notified by phone, email or mail confirming your status. Please note it may take up to 4 weeks to process. You will be asked to forward the appropriate pro-rated dues to initiate your membership. Upon receipt, you will receive a welcome package with your registration number and certificate.