



The Massage Therapy Association of Trinidad and Tobago (TMTATT)

(Incorporated by Act of Parliament, Act 8 of 1998)

#68 Market Street,
Gopaul Lands, Marabella

Office: (868) 221-5497
Cell: (868) 770-8994
Email: tmtattassociation@gmail.com
Web site: www.tmtattassociation.com/

APPLICATION TO WRITE THE LMT EXAM

Name: _____
Surname First Name Middle Name

Address: _____

Date of Birth: _____

Telephone #: (h) _____ (c) _____ (o) _____

Email: _____

Occupation:- _____

Have you graduated from a Registered /Accredited Institution ☐ YES ☐ NO

(Please state below the name, address of School/Institution where you graduated, the year and the number of hours completed)

PLEASE PLACE
PASSPORT
PICTURE HERE

Are you currently practicing massage: YES ☐ NO ☐ If YES, please state the number of years in the field _____

Are you currently licensed in any other state or country: ☐ YES ☐ NO

If YES give details: - _____

Use additional paper if necessary

REQUIRED: - Attach (1) a resume of yourself
(2) copies of certificates and diploma completed in **Massage Therapy**
(3) ALL applicants MUST attach above 1 passport size picture

☐ LMT REVIEW TT \$400.00 CASH ☐

☐ LMT EXAM TT\$400.00 CASH ☐

LMT REVIEW: - May and September of each year Cost \$400.00

LMT EXAM: - June and October of each year Cost \$400.00

Find the Rules & Regulations Booklet on the website

TOTAL: **\$800.00**

For further information, please contact the above numbers or email address.

***In order to qualify to write the Licensure exam, you must graduate from a program of a MINIMUM of 1000 hours (refer to Rules and Regulations Booklet)**