



Tennessee Massage Therapy Association

Professional Membership Application

TMTA
c/o Michele Mercante
1012 Clearview Dr. Mt. Juliet, TN 37122
(615)766-5533

Please Print All Information * Incomplete Applications Cannot Be Processed

I am applying for renewal of membership in the Tennessee Massage Therapy Association. Member #

I am hereby applying for membership in the Tennessee Massage Therapy Association.

Name: Mr./ Mrs./ Ms. (As you want it to appear on your certificate):

Address: City: State: Zip:

Home Phone: Business Phone: Cell Phone:

Business Name for "Locate a Massage Therapist" listing:

City: State: Zip:

State Massage License # Other Occupation?

Do you hold any other state massage licenses: Yes No State

STUDENT: Name & Address of School:

STUDENT: Date of Graduation: (Mo.) (Yr) STUDENT: Expected Date of Application for TN License:

E-Mail Address: Willing to receive newsletter via e-mail: Yes No

Membership Options Insurance includes professional (malpractice) liability, general (premises or 'slip & fall') liability, and product liability coverage. U.S. Residents Only.

Table with 3 columns: Membership Option, Price, Amount Paid. Rows include Professional Membership (With/Without Insurance), Additional Insurance Only, Friends of TMTA, and Student options.

What is your date of birth? (mm/dd/yy)

Method of Payment Check (Make payable to TMTA and send to above address. Do not send cash. U.S. Funds only.) NOTE: A \$50.00 fee will be charged for returned checks. Credit Card (We accept Visa or MasterCard) Visa MasterCard

Card Number (Please print clearly) 3-Digit Auth. Code Expiration Date Cardholder's Signature

Agreement FOR PROFESSIONAL AND STUDENT MEMBERS ONLY: Please understand that TMTA is a service organization promoting massage therapy in Tennessee. Joining is a declaration of your interest in working to promote the profession and unity among massage therapists. I attest to the best of my ability that all of the above information is true. Further, I understand that if any of this information is discovered to be false, my application will be rejected. Also, I have read the TMTA Code of Ethics and Membership Oath and agree to abide by their guidelines. Signature (REQUIRED) Date

Tennessee Massage Therapy Association

MEMBERSHIP OATH

By my signature below, I hereby covenant the following:

1. I have read the By-laws, Constitution, and Code of Ethics of the Tennessee Massage Therapy Association (TMTA), and hereby agree to abide by said By-laws, Constitution, and Code of Ethics.
2. I am a professional massage therapist/bodyworker licensed by the State of Tennessee. I agree that our primary goal is to promote massage therapy/bodywork in general but especially in Tennessee.
3. I realize at times there may be personal differences between members. However, I agree that our secondary goals are respectful tolerance, unselfish cooperation and fellowship among professional massage therapists/bodyworkers.
4. As an authorized holder of a massage therapy license from the state of Tennessee, I agree to abide by all the codes of professional conduct as set forth in the Massage Therapy Act of 1995.
5. I will voluntarily submit my resignation from the TMTA should a majority of the Board of Directors determine that I am ever guilty of any of the following acts of misconduct:
 - a. Being convicted or found guilty of a crime in any jurisdiction which directly relates to the practice of massage therapy/bodywork, or the ability to practice this profession, or to any of the following acts of misconduct. Any plea of nolo contendere shall be considered a conviction for purposes of this act.
 - b. Engaging in false, deceptive, or misleading advertising, or making deceptive, untrue, or fraudulent representations in the practice of massage therapy/bodywork.
 - c. Engaging, or attempting to engage, or offering to engage a client in sexual activity, including any genital contact, within a client/therapist relationship. A client shall be presumed to be incapable of giving free, full and informed consent to sexual activity with his/her therapist.
 - d. Failing to practice massage therapy/bodywork with reasonable care, skill, and safety to clients which is a recognized professional standard, by reason of malpractice or illness, or the misuse of alcohol, drugs, narcotics, chemicals, or any other substance, or as a result of any mental or physical condition.
 - e. Being found guilty of violating the professional codes of conduct as set forth in the Massage Therapy Act of 1995 resulting in a revocation of my license from the state of Tennessee. In this event, I understand there should be no refund of dues for the current year. I further agree to hold harmless any and all members of the Board of Directors of TMTA in this action, or any part of the TMTA, individually or as a whole.

CODE OF ETHICS

Massage therapists/bodyworkers shall:

- Serve and educate clients and the public about the benefits of massage therapies/bodywork.
- Promote unity within the profession
- Promote massage therapies/bodywork and other healing modalities in the communities served.
- Continue to promote professional excellence through continuing education, mastering skills used in practice, having a deep commitment to highest quality care.
- Practice within the scope of training and experience, referring clients to appropriate health care providers when another form of treatment or diagnosis is medically or ethically needed.
- Honor the value of the client without prejudice, honor the confidentiality of session time communications and procedures, and honor the responsibilities of our professional boundaries.
- Act to build and maintain sound mental, physical, and emotional health as an individual member of the healing arts profession.

