



## Application Under the Canadian Free Trade Agreement (CFTA) (For applicants from regulated jurisdictions only)

### A. Personal Information

First Name                      Commonly Used Name (if applicable)                      Last Name                      Middle Initial

Preferred Salutation (e.g., Mr. Ms. Mrs. Miss)

Date of Birth

### B. Home Contact Information

Street Address                      City/Town                      Province                      Postal Code

Home Phone #

Cell Phone #

Email Address

### C. Citizenship/Residence Status

Are you a Canadian citizen, landed immigrant, or have a valid employment authorization from Immigration Canada to engage in the practice of the profession?                      Yes                       No

### D. Education/Registration

Name of school where Massage Therapy program was completed                      Date program completed

Address of school where Massage Therapy program was completed

Please indicate which province you are coming from: \_\_\_\_\_

**Former registrants only** – If you were previously registered with the CMTO, please indicate your previous registration number if you can recall it: \_\_\_\_\_

Please list any jurisdictions outside of Canada you have been registered in: \_\_\_\_\_

Other than Massage Therapy, have you ever been registered with another health profession?                      Yes                       No

If yes, which profession? \_\_\_\_\_

If yes, in what province/state/country? \_\_\_\_\_

## E. Language Fluency Declaration

I am able to speak and write either English or French with reasonable fluency and, if requested by the College, will provide the requested proof of fluency. Yes  No

What is your preferred language of communication with the CMTO?  English  
 French

## F. Letter of Standing Form

Has a [Letter of Standing Form](#) been mailed by your regulator directly to CMTO? Yes  No

*Please note that your application will not be processed until a [Letter of Standing Form](#) has been received directly from your regulator. The form must have been completed by your regulator within the last six months.*

## G. Jurisprudence Program

It is a requirement under the Canadian Free Trade Agreement (CFTA) that applicants complete CMTO's online Jurisprudence Program. This program has three parts, is offered completely online and requires approx. 4-5 hours to complete. Once you have submitted this application, CMTO will contact you with more information about the program.

Once you have successfully completed the Jurisprudence Program, you will be required to complete the Initial Registration Process. Information about how to apply for registration with CMTO and details about required documents and fees will be provided to you by email at that time.

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I hereby certify that all statements I have made in all parts of this form are true and complete. I have read and understand all of the information provided above:

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please submit your completed form by mail, fax or email:**

**By Mail**

College of Massage Therapists of Ontario  
Attn: Registration Services  
1867 Yonge Street, Suite 810  
Toronto, ON M4S 1Y5

**By Fax**

416-489-2625

**By Email**

[registrationservices@cmto.com](mailto:registrationservices@cmto.com)