College of Massage Therapists of Ontario
175 Bloor Street East, North Tower, Suite 600, Toronto, ON, M4W 3R8
Phone: 416-489-2626 | Toll-free (Ontario) 1-800-465-1933
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Payment Plan Guidelines for 2027 General Certificate Renewal Fee

Where extenuating circumstances prevent a registrant from being able to fulfill their annual obligation to pay the required General Certificate renewal fee, CMTO may consider granting a payment plan on a case-by-case basis for requests made in writing with supporting documentation submitted on reasonable grounds and within specific criteria established by CMTO.

As noted above, the expectation is that all registrants will pay their General Certificate fee in full before the renewal deadline. Please note that consideration for a payment plan is available only to General Certificate holders experiencing extraordinary extenuating circumstances. Consideration is not intended for Inactive registrants.

What is an extenuating circumstance?
Extenuating circumstances are events or situations that are outside the control of the registrant and are severe enough to account for a registrant's inability to pay the General Certificate renewal fee in full before the deadline.

Extenuating circumstances could include, but are not limited to, situations where a registrant experiences a sudden and/or unavoidable impact to their financial situation, such as unexpected layoff from their employment, long term illness that has made it impossible for them to work, etc.

Such circumstances would rarely occur and are unpreventable and unforeseeable.

Submitting a request for a payment plan:

- Requests must be made with sufficient time for staff to assess and review all the information prior to **November 1, 2026**.
- Extenuating circumstances must be documented and indicate how/why the circumstance has led to an inability to pay the renewal fee in full before the end of the renewal period.
- Upon review, registrants will be notified by email of whether their request has been approved or declined.
- If approved for a payment plan, the approval is for one year only. If assistance is required in a subsequent year, a new request must be made.

Registrants who wish to request a payment plan must provide an explanation of their extenuating circumstances by completing the attached Payment Plan Request Form and include supporting documentation. These documents can be submitted to Registration Services by email at registrationservices@cmto.com.

What are the terms of a payment plan?

Should your request for a payment plan be granted, CMTO will provide you with a Payment Plan Agreement which you must sign and date in acknowledgement of the terms under which you are entering into an agreement with CMTO as follows:

- Your signed agreement must be received by CMTO before November 1, 2026:
    - If you choose to pay by credit card, you may email your signed agreement to registrationservices@cmto.com or mail your signed agreement to the CMTO address.
    - If you choose to pay by money order and cheques, payments must be mailed to the CMTO office with your signed agreement and received by CMTO before November 1, 2026. If you use Canada Post expedited/registered mail with a tracking number, please ensure your package does not require a signature upon delivery. Please do not use courier services such as FedEx, UPS and Purolator.
- The 2027 General Certificate fee of $915 must be paid in four equal installments:
    - To pay by credit card:
        - Log in to the Registrant Portal, click on 'Invoices & Receipts' from the blue menu on the dashboard to pay each invoice.
        - $228.75 is due on the day you complete the renewal form (**must be received no later than November 1, 2026**).
        - $228.75 due by **December 1, 2026.**
        - $228.75 due by **January 1, 2027.**
        - $228.75 due by **February 1, 2027.**

OR

    - To pay by money order and post-dated cheques:
        - $228.75 **money order** made payable to CMTO.
        - $228.75 cheque post-dated **December 1, 2026**.
        - $228.75 cheque post-dated **January 1, 2027**.
        - $228.75 cheque post-dated **February 1, 2027**.
        - **The money order and all three cheques must be mailed to CMTO together with your signed agreement and received by CMTO no later than November 1, 2026.**

- If a cheque is returned by the bank for non-sufficient funds (NSF), the registrant is subject to a $45 NSF charge in addition to the **full remaining balance** of the General Certificate renewal fee which must be paid by money order within **10 business days**.

- If a credit card payment is more than 10 business days late, the **full remaining balance** of the General Certificate renewal fee must be paid by credit card or money order within **10 business days**.

- Failure to adhere to the terms of the agreement will put your registration at risk and your Certificate of Registration may be subject to suspension for non-payment of fees.

Contacting CMTO

If you have any questions about the payment plan process or require assistance, please contact Registration Services by phone at 416-489-2626 extension 4141 or by email at registrationservices@cmto.com.

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Payment Plan Request Form for 2027 General Certificate Renewal Fee

Please carefully review the Payment Plan Guidelines before making your request.
Your request must include supporting documentation to be reviewed and considered.

Personal Information

First Name | Last Name | Middle Initial

CMTO Registration Number

Home Contact Information

Street Address | City/Town | Province | Postal Code

Home Phone # | Cell Phone # | Email Address

Please provide a summary of the extenuating circumstances you feel justify your being granted a payment plan for your 2027 General Certificate renewal fee:

Type of Supporting Documentation Included	Notes

Accuracy of Information	
I hereby certify that all statements I have made in all parts of this form are true and complete (Please note that submitting a document that you know provides false or misleading information is professional misconduct and may result in disciplinary action by the College).	Yes ☐ No ☐

Signature: _____ **Date:** _____