



NORTH CAROLINA BOARD of MASSAGE AND BODYWORK THERAPY

4140 ParkLake Avenue

Suite 100

Raleigh, NC 27612

NOTIFICATION OF NON-RENEWAL OF LICENSE

Please complete this form **ONLY** if you **ARE NOT RENEWING** your license to practice massage and bodywork therapy in the state of North Carolina

NORTH CAROLINA LICENSE NUMBER: _____

Last Name: _____ First: _____ Middle/Maiden: _____

Your Name as it appears on your license if different from above: _____

Current Address: _____ City: _____ State: _____ Zip: _____

County: _____ Email Address: _____

Home Phone: (____) _____ Cell Phone: (____) _____ Work Phone: (____) _____

Check the box that applies to you:

☐ **I WILL NOT BE RENEWING THIS YEAR AND UNDERSTAND MY LICENSE EXPIRES DECEMBER 31.**

☐ **I WILL NOT BE RENEWING MY NORTH CAROLINA LICENSE PERMANENTLY.**

Pursuant to Rule.0303, licenses expired in excess of 24 months shall not be renewable. Persons whose licenses have been expired in excess of 24 months and who desire to be licensed shall apply for a new license and shall meet all the requirements then existing.

Signature

Date