

The College of Massage Therapists of Prince Edward Island requests the completion of this form when filing a report of unauthorized use of a professional title against **an individual who is not a massage therapist registered with the College.**

Before filling out and submitting this form, please make sure the name of the person you are reporting is **not** on the [list of PEI registered massage therapists](#).

The reserved titles, abbreviations and initials for registered massage therapists in PEI include:

- (a) massage therapist;
- (b) MT;
- (c) registered massage therapist;
- (d) RMT.

Information about the person filing the report

PERSON MAKING REPORT				
Name	<input type="text"/>	<input type="text"/>		
	GIVEN NAME(S), INITIAL(S)	LAST NAME		
Address	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	STREET NUMBER - STREET NAME - APT. /UNIT NUMBER	CITY / COMMUNITY	PROVINCE	POSTAL CODE
Phone	<input type="text"/>	Email <input type="text"/>		

Information about the subject of the report

Please provide as many details as possible about the individual you are reporting and their place of business.

Individual's Name	<input type="text"/>	<input type="text"/>		
	GIVEN NAME(S), INITIAL(S)	LAST NAME		
Business information				
Business Name	<input type="text"/>	Website URL <input type="text"/>		
Address	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	STREET NUMBER - STREET NAME - APT. /UNIT NUMBER	CITY / COMMUNITY	PROVINCE	POSTAL CODE
Phone	<input type="text"/>	Email <input type="text"/>		

Report details PLEASE PROVIDE ALL RELEVANT DETAILS ABOUT THE NON-REGISTRANT'S UNAUTHORIZED USE OF RESERVED TITLES

Physical and documentary evidence

*If you have any physical evidence related to your report, please preserve that evidence carefully.
Please submit digital photograph(s), copies or scans of physical or documentary evidence along with this form.
Please list all the evidence you have in the box below.
Physical evidence may also be mailed to:*

*Inquiry & Discipline Committee
College of Massage Therapists of Prince Edward Island
P.O. Box 21134
Charlottetown, PE C1A 9H6*

Signature:

Date: