



Massage and Bodywork Establishment Employee & Contractor Log

Per Mesa City Code, Title 5, Chapter 12, a list of all employees and independent contractors who will provide massage therapy or bodywork within Mesa must be submitted to the City. Any changes to staffing during the license term must be reported within ten (10) calendar days of the occurrence.

For new or renewal applications: Complete the following form by listing the below requested information for all establishment employees and contractors. This form must be submitted to the Licensing office along with your new or renewal Massage or Bodywork Establishment application.

For existing establishment licensees: If you are just reporting a change, complete this form by providing all below requested information for only the individuals being added or removed.

****Please note: A copy of the Arizona Massage Therapy License for each therapist that will be performing massage at the establishment must be included with this completed form. This includes new and renewal applications and existing establishment licensees reporting a change.**

Business Name (DBA): _____

Business Location Address: _____

License or Application Number: _____

Employee or Contractor Name	Employment Position	Hire Date	Does this person perform massage?	Is this an existing employee or a change in status?
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Existing

 Licensee Name (Print) Licensee Signature Contact Phone Date