

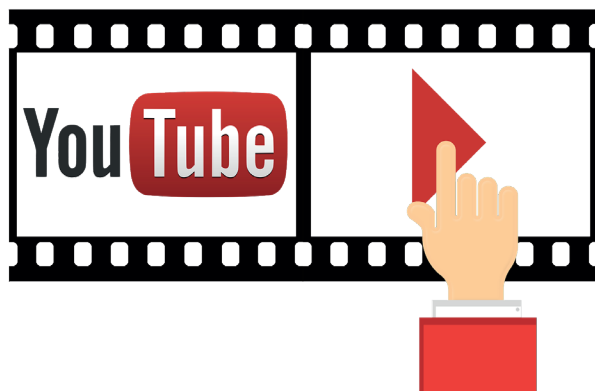
TABLE TALK

www.amt.org.au

AMT NEWSLETTER

- October 2016

AMT Celebrates its 50th Anniversary via YouTube



Did you know that AMT has its own YouTube channel? You can find it here: www.youtube.com/channel/UCRJENFpS1dZl66oTSH4UIRw

Recent additions to the channel include a number of AMT Branch anniversary wishes and the AMT 50th anniversary history slideshow.



As part of AMT's 50th anniversary commemorations, member and ex-president Alan Ford has written a poem dedicated to AMT. The poem, included as part of the ACT Branch anniversary video, has been reprinted here:

A Dedication to AMT

by Alan Ford

With hard work, foresight and dedication,
Our beloved founders were an inspiration,
To all involved we owe to you our utmost admiration,
Without your passion for our profession,
We would not have this great organisation,
Here's to you, AMT.

Don't miss the December edition of the *In Good Hands* journal for a recap of all things conference, the much maligned abductor hallucis and more.

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AMT member receives \$6000 settlement in Industrial Relations Commission

In late June, a Queensland member made contact with AMT Head Office after seeing posts in AMT's closed Facebook group about sham contracting arrangements in the massage industry. The member was seeking guidance in connection with her workplace contract at a chiropractic clinic in outer Brisbane. After a number of informative discussions, our member contacted Fair Work and lodged a claim. The Fair Work Claims lawyer assigned to her case took the matter to the Queensland Industrial Relations Commission where the claim was settled out of court. Our member was granted a \$6000 settlement by the Commission in late August. She will now be pursuing unpaid superannuation entitlements through the Australian Taxation Office.

Fair Work issues a follow-up warning to owners of massage shops

On 14 September, the Fair Work Ombudsman issued a strongly-worded media release, warning the operators of massage shops that flouting minimum pay rates and exploiting vulnerable overseas workers will not be tolerated.

This latest warning followed a case in Melbourne where Fair Work inspectors uncovered the underpayment of vulnerable workers at a massage shop in the CBD. The Agency announced enforcement action against Sen's Body & Mind in the Melbourne Central Shopping Centre for misclassifying employees as independent contractors.

When Fair Work inspectors audited the business, it found that 10 of the 11 workers were international students or backpackers on 417 working holiday visas. Inspectors found that six staff had been underpaid a total of \$5,152 between December 21, 2015 and January 10, 2016. The largest underpayment of an individual worker was \$1,036. Sen's Body & Mind paid each of the workers 45 per cent of the cost of each massage treatment they performed.

In March, the Federal Circuit Court imposed penalties of more than \$118,000 against the operators of two Melbourne massage shops that underpaid two therapists more than \$54,000.

In commenting on the Sen's Body & Mind case, Fair Work Ombudsman Natalie James said that the Fair Work Ombudsman has identified a common business model operating across many massage shops and clinics. Therapists are paid a percentage of the cost of the massage they perform, typically 50 per cent, with no remuneration for time spent at the business where they have no clients.

You can access the full Fair Work media release here: <https://www.fairwork.gov.au/about-us/news-and-media-releases/2016-media-releases/september-2016/20160914-sens-eu-mr>

Complaint lodged with the Queensland Anti-Discrimination Commission goes to conciliation

In August, AMT provided support to a massage therapist who lodged a complaint with the Queensland Anti-Discrimination Commission (ADCQ). The complaint was in connection with a job advertisement that specified that a particular gendered therapist was required to fill the role. The therapist who lodged the complaint applied for the position and was rejected on the basis of gender.

The ADCQ accepted the complaint and took the matter to conciliation. AMT supported the complainant and provided a letter to the Commission clearly stating that there are no legitimate reasons for discrimination in the massage therapy industry, referencing the standards in the AMT Code of Practice.

At the conciliation, the employer issued a written apology, made a payment of monetary compensation for hurt and distress, and has agreed to undergo training.

AMT is pleased the matter could be resolved in a short period of time, reducing stress for all parties involved. We would be happy to assist other therapists who may suffer discrimination in the future.

Know Your Legal Rights - Are You Really an Employee or a Contractor?

Recent media attention has focused on whether massage therapists are properly engaged by the clinics they work in and whether the clinics are providing therapists with all of their legal entitlements, which are protected by legislation. Some therapists have been underpaid thousands of dollars over short periods of time. Sadly, AMT hears about poor working conditions far too often and we field a growing number of calls from members seeking guidance on employment-related issues.

The Fair Work Ombudsman (FWO) has recently confirmed that at least 40 to 60% of clinics do not comply with the requirements for therapists in clinic settings. The most common breaches of lawful entitlements include:

- only paying therapists a percentage rate for massages done
- not paying therapists for time between massages
- failing to pay annual leave and other statutory entitlements (e.g. loading if they were casual rather than entitlements as a permanent staff member)
- failing to provide pay slips
- failing to maintain proper staff records
- not providing staff with the National Employment Standard (NES) requirements
- telling massage therapists they are contractors rather than employees (which is sometimes also an offence of 'sham contracting'). Unfortunately, it is a common myth that having an ABN, submitting invoices for work done or holding personal insurance will automatically make a person a contractor - this is not always true! The ATO has created a 2-minute YouTube video on these myths, which is aimed at employers, called "Employee or Contractor? Avoid the Myths". You should have received a link to the video via text message from AMT by now.



So, how do you know if you are being paid properly? And what can you do if you think you may not be receiving all your entitlements? The FWO website has some great information, including how they can help you:

<https://www.fairwork.gov.au/how-we-will-help/how-we-help-you>

If you think you have been denied your legal entitlements, you can lodge a complaint, either anonymously or with your details. Alternatively, the FWO has a free advice line, details of which are here: <https://www.fairwork.gov.au/contact-us>

You may also be entitled to free advice from a community legal centre if you are a low-income earner. This is an excellent option if you have either a written or oral contract where your clinic has said you are not entitled to annual leave and/or you have not been receiving pay slips etc. They may be able to help you demonstrate sham contracting arrangements or help you get back any entitlements you have not received.

AMT WORKSHOP

Employment and Super: Know your Rights, Know your Responsibilities

Presented by Ross Ashcroft,
massage therapist and ex-lawyer

Sunday 6 November 2016

Australasian College of Natural Therapies
235 Pyrmont Street, Pyrmont, Sydney

For more details go to page 18.

Meet the AMT Directors: Dave Moore

This edition of the 'Meet the Directors' series introduces Dave Moore. AMT sat down for a fast and furious interview to find out about Dave's career, his involvement with AMT and what he gets up to in his spare time.



What field of massage therapy do you practice?

Over the years I've studied many different modalities. I select what I believe will be most effective for each individual client.

How long have you been a therapist?

All of this century.

Where did you start your career?

Here in Sydney.

What has been your greatest career challenge to date?

Managing a full time job in another field, running a clinic and being a board member all at once! I've recently retired from the full time job. =)

What's the best thing to happen since you started working as a massage therapist?

Discovering how much I love anatomy.

Tell me how you first got involved in AMT?

AMT was promoted by one of the teachers whom I respected at college.

Why did you join?

I liked the idea of a single modality association.

What aspects of AMT are you most passionate about?

Its advocacy of the profession, especially in dealing with health funds and other "authorities".

What do you wish other people knew about AMT?

How much work head office does on behalf of members.

What do you think is the most important thing AMT has achieved or is doing?

The AMT Code of Practice. It's an industry leading document and it took a lot of hard work to develop and maintain it.

What would you tell someone who is thinking about becoming a massage therapist?

You will never get rich, but seeing clients walk out better than they walked in because you have helped them is the best reward.

How long have you been a Board member?

I was first elected in 2008.

Why did you decide to join the AMT Board?

I was asked to nominate by the then President - I had been assisting at conferences and classes prior to that.

What do you bring to the AMT Board?

Years of experience in management and project management.

What are your specific roles on the AMT Board?

I look after the money (I'm treasurer) and am on the discipline committee. I also audit members' client records when questions are raised by the health funds and attempt to help them improve.

What are the rewarding aspects of being on the Board?

Working with a group of people towards a set of common aims without any personal gain.

The challenging aspects?

The lack of understanding and appreciation of our work by some members who just see AMT as an "accreditation factory".

What does being an AMT Board member give back to you?

The pleasure of working in a team of like-minded professionals.

If you weren't on the Board, what would you be doing instead?

Goodness knows, I'd probably volunteer for something else!

What do you do when you aren't working?

Ride motorbikes and travel.

Who or what inspires you?

People with the courage to follow their star.

Three things people might not know about me...

I have a Grammy Award nomination for classical music recording; I was an electrician for the Rolling Stones in the 70s; I lived in Papua Niugini in the early 80s teaching broadcast technology and driving Ambulances.

What are you currently reading?

Comedian Kenneth Williams' Diary.

Listening to?

A diverse range of music, from classical to Pink Floyd (just not rap, hip hop or anything autotuned).

Watching?

Junk on TV.

At home I cook...

I bake bread and cook 80% of our meals - roasts, Italian, Asian... whatever looked good at the markets.

My worst habit is...

Impatience.

My first job was...

Roadie/event electrician.

What else would you like to share?

To paraphrase JFK, I'd like members to "think not what your Association can do for you, think what you can do for your Association".

50 Years of AMT – Fun Facts



The First Logo

2

At the end of 1983, HCF started paying a \$10 benefit for massage therapy. They withdrew the benefit at the end of 1985 due to policy changes.

3

Massage Therapy is officially recognised as a unique profession with distinguishable skills and training, for the first time in 1998. Australian Standard Classification of Occupations (2nd ed): Unit Group 3494 – Massage Therapists.

4

The membership fee in 1985 was \$45.00. There was also a \$10 uniform badge and an extra \$12 journal fee.

5

In 1995 AMT had approx. 600 members. We currently have just over 2800 members.

6

AMT's first website went live in 1997.

7

In 1998 members of the AMT voted in favour of the use of the term Massage Therapist as the proper and professional title of its members.

8

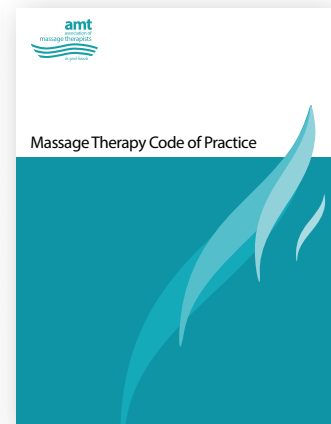
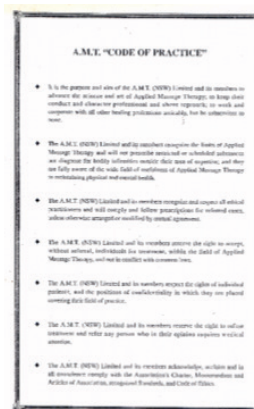
AMT's public facebook page receives between 5,000 to 30,000 views every week.

9

The first AMT Code of Ethics was produced in 1969, with an update in 1984. The most recent update to the AMT Code of Ethics was in 2013.

10

The first AMT Code of Practice was released in 1991 and was just 7 dot points. The current Code of Practice is 72 pages long.



For all the latest research news, events and AMT gossip...

follow us on
twitter

<http://twitter.com/#!/ramblingamt>



Meet the Office Staff: Katie Snell

Ever wonder who the fairies are in the office who work their magic to keep AMT running so efficiently day-to-day? In this series of interviews AMT will sit down with our wonderful team to find out about them and what they do for AMT.

In this inaugural column AMT talked with office manager Katie Snell.



How long have you worked for AMT?

Although it doesn't feel like it has been this long, on the 16th October this year I will be celebrating my 10-year anniversary working for AMT which is really exciting.

**Ed's note: Katie is the first AMT employee to be eligible for long service leave. A remarkable achievement for both Katie and AMT!*

Where did you start your career?

The first job I had after leaving high school was as a receptionist for a shop fitting company - CPM Marketing. I thought it was great to be earning my own money (\$250/week) only being 15 at the time and, although it wasn't the greatest job in the world, it did give me an opportunity to build skills I didn't have to start me on my pathway to bigger and better things.

My mother always encouraged me to work in administration/office roles when I decided to leave school early as there is such a wide range of industries to choose from and lots of opportunities to build a wide range of skills.

What is your specific role at AMT?

I'm the office manager at AMT. I'm responsible for managing and developing the administrative services of AMT including IT, member services, personnel, organisational development and administrative systems and practices, to enhance and support the role and objectives of AMT.

Although when I started at AMT 10 years ago I was a trainee and my role was an administration officer. Starting as an admin officer gave me the required skills and knowledge I have today to be able to perform in my role as the office manager.

What are the rewarding aspects of working for AMT?

I would have to say the people I get to work with (staff, AMT board and members) and the environment I get to work in. Working in the not-for-profit sector is quite different from the corporate environment and having worked in both I much prefer the more relaxed and personal feel of the not-for-profit sector.

Rebecca Barnett is someone I really admire and respect, I think I'm really lucky to get to work alongside someone as remarkable as she is.

The staff at head office, Rebekah, Valentine, Rema and Nicole, are all so amazing and each bring their own dynamics and skills to the table. We are a very close knit team who are always striving to help and encourage each other, no-one is out for themselves which makes coming to work every day a joy. I'm lucky to have such a great group of women to work with.

The AMT directors are also a joy to work with, they are very supportive of me, the staff and the members.

Members who truly value their memberships and are always grateful and appreciative of what the staff and AMT does for them.

The challenging aspects?

Working in the not-for-profit sector is challenging at times as you're always restricted by resources (human and financial) and where it is best to focus them. There are so many things AMT would like to do but just doesn't have the resources to do so.

Some of the other things I find challenging to deal with are people's attitudes, sense of entitlement and how they value their membership. Some people have unrealistic expectations about what the role of the association is. People expect us to do things outside our role as an association but they feel as though they pay us a membership fee so it entitles them to sometimes be quite disrespectful in the way they speak to us or what they think they should be getting out of their membership.

There seems to be a lack of community spirit and belonging to a professional organisation for recognition as a professional these days.

What do you do when you aren't working?

I'm a bit of a homebody so when I'm not working I like to relax at home and spend time with my fiancé, John, and my bulldog, Rebel. I also enjoy good food, wine and the company of family and friends and to just have a laugh, let my hair down and unwind.

What might (someone) be surprised to know about you?

I can come across as quite confident and outgoing to some people but I'm actually quite shy until I feel comfortable enough to come out of my shell. Working in customer service has helped me to try and overcome and develop this but I still find it difficult at times, especially in a setting where I'm meeting people for the first time by myself.

My worst habit is...

I would have to say overthinking things and doubting my capabilities. I seem to second guess myself and just go into overload with my thoughts and get inside my own head too much. When I was doing my diploma I often did this, getting myself worked up about my understanding of my assignments but I would

submit them and get good marks so it was all just me overthinking things and doubting myself.

Saving for...

Having purchased my first house just over a year ago saving is a bit tricky. There are a lot of things I'd love to save for but the next thing I will save for is my wedding.

I've been with my fiancé, John, for 13 years and engaged for 11 of those years so he really has the patience of a saint waiting for me to start making plans for our wedding.

I procrastinate by...

finding other things or tasks to complete before I start tackling the one I should be doing.

Handy Hint from Head Office

Need your CEUs? Plan ahead.

Each member has a year to complete their CEUs, so you should plan ahead so you don't get yourself into a situation where your CEUs are due and you haven't done anything.

Even if you only plan to attend the AMT conference every year, two days attendance will give you your full quota of CEUs. The bonus is it's also a fantastic opportunity to learn new skills or refresh some old ones and network with your peers.

Too many people leave their CEUs until the month they're due, then call the office in a big panic because they need to complete their full quota within a few weeks. We understand it's not always possible for people to attend courses so AMT does have suggestions on how to make up CEUs in other ways.

If you are struggling or need suggestions contact the AMT office and we will be happy to help you - just don't leave it to the last minute.

The other handy hint is when you are submitting CEU activities please provide us as much information about the course content, duration (hours), dates as possible. This will speed up the process of the education committee being able to determine if and how many CEUs we can award you for that activity.

ACT

by Jessica Cameron

In August we had our first meeting since the AGM in May. We tend to hibernate for the winter here in Canberra.

Our August meeting was at our lovely treasurer's residence, Irina. One of our members, Ben Connelly, did a presentation on Corporate Seated Massage. If you have never had a massage before then this is the way to introduce people to massage.



ACT branch members learning the finer points of seated massage.

The key to a 15-minute seated treatment is that at the end of the session the client should feel better, they must know more about how to address their particular issues, as in how to stretch the parts of their body that need attention, and they should feel they have been CARED for.

The power of touch is so important in this short exchange between therapist and client. This is such an important tool to use to introduce people to your business.

We then finished our meeting by doing a short video to celebrate 50 years of AMT!! This was followed by sharing a magnificent 50th Anniversary cake, made by Suzanne Davis, and Champagne!!

Illawarra

by Linda White

The end of 2016 is fast approaching and it already has started with a big bang celebration of AMTs 50th Anniversary. At our August meeting, AMT Illawarra put together a fun video congratulating AMT on its half century achievement. A big thank you to everyone who came along and made it such a fun night – from Lloyd who arranged the delicious cake to Brad who put everything together to make the video on such short notice!



Recently, one of our members, Sarah, made "the epic journey north to the big smoke" to attend AMTs 50th Anniversary Conference at Milson's Point, Sydney. She found the key speakers to be inspiring, thought provoking and very informative. "We then celebrated our past and learnt some fascinating facts about AMT. We met four people who were the longest serving members of AMT... I had a great time at the conference and would recommend any one that has not been to one before to go."

Last month Tricia Colvin and her lovely assistant, Leanne, demonstrated a seated massage sequence that the Massage in Schools Program have developed. Officially founded in 2000 by Mia Elmsater from Sweden and Sylvie Héту from Canada, it is a simple program for promoting healthier self-esteem and emotional development, and less aggression and bullying among school children. Those attending the presentation each received a massage sequence chart and spent the rest of the evening giving and receiving the various techniques used. Everyone agreed it was very relaxing and expressed how much they needed it!

SAVE THE DATE

Tuesday, 29 November 2016 is our Annual General Meeting and Christmas Party night. It will be held at Murphy's Bar & Grill, Princes Highway, Unanderra starting at 6.30pm.

AMT Illawarra will hold its next formal meeting on Tuesday, 25 October in the Bottlebrush Room, Corrimall Community Centre, Short Street Corrimall commencing at 7pm (cost \$10).

We look forward to seeing you at our next meeting!

For all inquiries:

Contact Linda White

lindamassage@bigpond.com or 0417 671 007.

Mid-North Coast

by Kristy Baird

The members of the Mid-North Coast branch were treated to an informative and practical reflexology workshop at the August meeting. Local reflexologist Brenda Sarno (standing in the picture below) instructed members through a sequence on the feet, explaining the different points along the way.

This is a wonderful experience for the therapists when both giving and receiving. Members sent their congratulations to AMT on their 50th anniversary, and look forward to the future.

The next meeting is an AGM in October.

The branch meets bimonthly on the 3rd Saturday of the month.



Practising reflexology under the watchful eye of Brenda Sarno.

AMT has released its Research Round-Up - a summary of open access massage therapy research released over the preceding month, including hyperlinks to the full free text articles available online. Here is the latest list of current open access research:

The effect of manual therapy and neuroplasticity education on chronic low back pain: a randomized clinical trial

Louw A, Farrell K, Landers M, Barclay M, Goodman E, Gillund J, McCaffrey S & Timmerman L

J Manual & Manipulative Therapy, Sep 2016, pp.1-8.

The purpose of the study was to determine if a neuroplasticity educational explanation for a manual therapy technique will produce a different outcome compared to a traditional mechanical explanation. Sixty-two patients with chronic low back pain (CLBP) were recruited for the study. Following consent, demographic data were obtained as well as pain ratings for low back pain (LBP) and leg pain (Numeric Pain Rating Scale), disability (Oswestry Disability Index), fear-avoidance (Fear-Avoidance-Beliefs Questionnaire), forward flexion (fingertips-to-floor), and straight leg raise (SLR) (inclinometer). Patients were then randomly allocated to receive one of two explanations (neuroplasticity or mechanical), a manual therapy technique to their lumbar spine, followed by post-intervention measurements of LBP, leg pain, forward flexion, and SLR. Sixty-two patients (female 35 [56.5%]), with a mean age of 60.1 years and mean duration of 9.26 years of CLBP participated in the study. There were no statistically significant interactions for LBP ($p = .325$), leg pain ($p = .172$), and trunk flexion ($p = .818$) between the groups, but SLR showed a significant difference in favor of the neuroplasticity explanation ($p = .041$). Additionally, the neuroplasticity group were 7.2 times (95% confidence interval = 1.8–28.6) more likely to improve beyond the MDC on the SLR than participants in the mechanical group. The results of this study show that a neuroplasticity explanation, compared to a traditional biomechanical explanation, resulted in a measureable difference in SLR in patients with CLBP when receiving manual therapy. Future studies need to explore if the increase in SLR correlated to changes in cortical maps of the low back.

<http://www.tandfonline.com/doi/abs/10.1080/10669817.2016.1231860?journalCode=yjmt20&>

Severity of back pain may influence choice and order of practitioner consultations across conventional, allied and complementary health care: a cross-sectional study of 1851 mid-age Australian women

Sibbritt D, Lauche R, Sundberg T, Peng W, Moore C, Broom A, Kirby E & Adams J.

BMC Musculoskeletal Disorders, 2016, 17:393.

Back pain is a common, disabling and costly disorder for which patients often consult with a wide range of health practitioners. Unfortunately, no research to date has directly examined the association between the severity of back pain and back pain sufferers' choice of whom and in what order to consult different health practitioners. This is a sub-study of the large nationally representative Australian Longitudinal Study on Women's Health (ALSWH). The mid-age cohort women (born 1946-51, $n = 13,715$) of the ALSWH were recruited from the Australian national Medicare database in 1996. These women have been surveyed six times, with survey 6 being conducted in 2010 ($n = 10,011$). Mid-age women ($n = 1851$) who in 2010 had sought help from a health care practitioner for their back pain were mailed a self-report questionnaire targeting their previous 12 months of health services utilisation, health status and their levels of back pain intensity. A total of 1620 women were deemed eligible and 1310 (80.9 %) returned completed questionnaires. Mid-age women with back pain visited various conventional, allied health and CAM practitioners for care: 75.6 % consulted a CAM practitioner; 58.4 % consulted a medical doctor; and 54.2 % consulted an allied health practitioner. Women with the most severe back pain sought conventional care from a general practitioner, and those who consulted a general practitioner first had more severe back pain than those who consulted another practitioner first. Following the general practitioner visit, the women with more severe back pain were more likely to be referred to a conventional specialist, and those with less severe back pain were more likely to be referred to a physiotherapist. Our findings suggest that women with more severe back pain are likely to visit a conventional practitioner first, whereas women with less severe back pain are likely to explore a range of treatment options including CAM practitioners. The improvement of back pain over time following the various possible sequencing of consultations with different types of health practitioners is a topic with implications for ensuring safe and effective back pain care and worthy of further detailed investigation.

<http://bmcmusculoskeletdisord.biomedcentral.com/articles/10.1186/s12891-016-1251-0>

Why neck pain patients are not referred to manual therapy: A qualitative study among Dutch primary care stakeholders

Dijkers MF, Westerman MJ, Rubinstein SM, van Tulder MW & Anema JR.

PLoS ONE, 2016, 11(6): e0157465.

Treatment of neck pain with manual therapy demonstrated to be more effective and cost-effective than general practitioner (GP) care or physiotherapy in a high quality RCT in the Netherlands in 2002. However, referral to manual therapy for neck pain is still relatively low. This study aims to explore the barriers and facilitators affecting the implementation of manual therapy in neck pain management in primary care. An explorative study was conducted comprising semi-structured interviews with GPs (n = 13), physiotherapists (n = 10), manual therapists (n = 7) and their patients with neck pain (n = 27), and three focus groups with additional stakeholders (n = 10–12 per group). A thematic analysis approach was used. Different barriers and facilitators for referral were found for patients, GPs and physiotherapists on the individual level, but also in the interaction between stakeholders and their context. Individual perceptions such as knowledge and beliefs about manual therapy for neck pain either impeded or facilitated referral. Fear for complications associated with cervical manipulation was an important barrier for patients as well as GPs. For GPs and physiotherapists, it was important whether they perceived it was part of their professional role to refer for manual therapy. Existing relations formed referral behaviour, and the trust in a particular practitioner was a recurrent theme among GPs and physiotherapist as well as patients. The contextual factor availability of manual therapy played a role for all stakeholders. Barriers and facilitators were found especially in individual perceptions on manual therapy for neck pain (e.g. knowledge and beliefs), the interaction between stakeholders (e.g. collaboration and trust) and the organizational context. Implementation strategies that focus on these different aspects seem to be likely to optimize referral rates and the use of manual therapy in primary care management of neck pain.

<http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0157465>

Hospital Based Massage Therapy: A Call for Competencies

Brennan MK, Healey DC, Tague MC & Rosenthal B. *Massage Magazine* 2016.

An increasing percentage of hospitals are offering massage therapy to their patients. Massage therapy is the top CAM service provided on an outpatient basis. The ACIH's HBMT Task Force was formed to explore the need for a set of standard competencies for the practice of massage therapy in hospital environments, given that no such resource exists. A standard set of competencies will be useful to hospitals, massage therapy schools and massage therapists themselves. The task force designed a survey that was distributed to a convenience sample of hospitals to assess various elements of their massage therapy programs. Thirty-two out of 37 hospitals that received the survey completed it, resulting in an 87 percent response rate. With recognition of a small convenience sample, we believe the high response rate and the extent to which respondents provided in-depth information to the open-ended questions indicates interest in and a recognized need for HBMT competencies. The wide range of responses relative to educational requirements, orientation procedures and competencies in general, suggests a need for standardization of competencies to support safe and effective HBMT services for patients. Next steps will be to work with educators and practitioners in the HBMT field to augment the ACIH Competencies for Optimal Practice in Integrated Environments and develop specific competencies for hospital based massage therapy.

<https://www.massagemag.com/hospital-based-massage-therapy-call-competencies-37084/>

The use of complementary and alternative medicine by 7427 Australian women with cyclic peri-menstrual pain and discomfort: a cross-sectional study

Fisher C, Adams J, Hickman L & Sibbritt D.

BMC Complement Altern Med. [Epub ahead of print.]

To assess the prevalence of cyclic peri-menstrual pain and discomfort and to detail the pattern of complementary and alternative (CAM) use adopted by women for the treatment of these symptoms. Data from the 2012 national Australian Longitudinal Study of Women's Health (ALSWH) cross-sectional survey of 7427 women aged 34–39 years were analysed to estimate the prevalence of endometriosis, premenstrual syndrome (PMS), irregular or heavy periods and severe dysmenorrhoea and to examine the association between their symptoms and their visits to CAM practitioners as well as their use of CAM therapies and products in the previous 12 months. The prevalence of endometriosis was 3.7 % and of the peri-menstrual symptoms assessed, PMS was most prevalent at 41.2 % whilst irregular bleeding (22.2 %), heavy periods (29.8 %) and severe period pain (24.1 %) were reported at lower levels. Women with endometriosis were more likely than non-sufferers to have consulted with a massage therapist or acupuncturist and to have used vitamins/minerals, yoga/meditation or Chinese medicines ($p < 0.05$). PMS sufferers were more likely to consult with an osteopath, massage therapist, naturopath/herbalist or alternative health practitioner and to have used all forms of CAM therapies except Chinese medicines than women who had infrequent PMS (all $p < 0.05$). Women with irregular periods did not have different patterns of CAM use from non-sufferers and those with heavy periods did not favour any form of CAM but were less likely to visit a massage therapist or use yoga/meditation than non-sufferers ($p < 0.05$). For women with severe dysmenorrhoea there was no difference in their visits to CAM practitioners compared to non-sufferers but they were more likely to use aromatherapy oils ($p < 0.05$) and for more frequent dysmenorrhoea also herbal medicines, Chinese medicines and other alternative therapies compared to non-sufferers (all $p < 0.05$).

There is a high prevalence of cyclic peri-menstrual pain and discomfort amongst women in this age group. Women were using CAM differentially when they had specific symptoms of cyclic peri-menstrual pain and discomfort. The use of CAM needs to be properly assessed to ensure their safe, effective use and to ascertain their significance as a treatment option enabling women with menstrual problems and their care providers to improve their quality of life.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4870787/>

Gait analysis of patients with knee osteoarthritis before and after Chinese massage treatment

Qingguang Z, Min F, Li G, Shuyun J, Wuguan S, Jianhua L & Yong L.

J Tradit Chin Med, 2015, 35(4):411–416.

The objective of this study was to evaluate the effectiveness of Chinese massage therapy in patients with knee osteoarthritis (OA) by measuring lower-limb gait parameters. We recruited 20 women with knee OA, who then underwent Chinese massage therapy three times per week for 2 weeks. The patients underwent gait evaluation using a six-camera infrared motion analysis system. They completed Western Ontario and McMaster Universities Osteoarthritis Index questionnaires before and after treatment. We calculated the forward speed, step width, step length, total support time percentage, initial double support time percentage, and single support time percentage. We also measured the angles at the knee, hip, and ankle during the stance phase of walking. The results showed statistically significant mean differences in knee pain relief, alleviation of stiffness, and physical function enhancement after therapy ($P < 0.05$). The patients gained significantly faster gait speed, greater step width, and increased total support time percentage after the Chinese massage therapy ($P < 0.05$). There were no significant differences in the range of motion or initial contact angles of the knee, hip, or ankle during the stance phase of walking. We concluded that Chinese massage is a beneficial complementary treatment and an alternative therapy choice for patients with knee OA for short-term pain relief. Chinese massage may improve walking ability for these patients.

<http://www.journaltcm.com/modules/Journal/contents/stories/154/7.pdf>

Massage therapy has short-term benefits for people with common musculoskeletal disorders compared to no treatment: a systematic review

Bervoets DC, Luijsterburg PA, Alessie JJ, Buijs MJ & Verhagen AP.

J Physiother, 2015, 61(3), 106-116

Is massage therapy effective for people with musculoskeletal disorders compared to any other treatment or no treatment? A systematic review of randomised clinical trials on people with musculoskeletal disorders used massage therapy (manual manipulation of the soft tissues) as a stand-alone intervention. The primary outcomes were pain and function. The 26 eligible randomised trials involved 2565 participants. The mean sample size was 95 participants (range 16 to 579) per study; 10 studies were considered to be at low risk of bias. Overall, low-to-moderate-level evidence indicated that massage reduces pain in the short term compared to no treatment in people with shoulder pain and osteoarthritis of the knee, but not in those with low back pain or neck pain. Furthermore, low-to-moderate-level evidence indicated that massage improves function in the short term compared to no treatment in people with low back pain, knee arthritis or shoulder pain. Low-to-very-low-level evidence from single studies indicated no clear benefits of massage over acupuncture, joint mobilisation, manipulation or relaxation therapy in people with fibromyalgia, low back pain and general musculoskeletal pain. Massage therapy, as a stand-alone treatment, reduces pain and improves function compared to no treatment in some musculoskeletal conditions. When massage is compared to another active treatment, no clear benefit was evident.

[http://www.journalofphysiotherapy.com/article/S1836-9553\(15\)00058-2/abstract](http://www.journalofphysiotherapy.com/article/S1836-9553(15)00058-2/abstract)

Complementary therapies for osteoarthritis: Are they effective?

Shengelia R, Parker SJ, Ballin M, George T & Reid MC. *Pain Manag Nurs*, 2013, 14(4), e274-288.

Increasing interest has focused on complementary management modalities, including tai chi, acupuncture, yoga, and massage therapy, as treatments for osteoarthritis (OA). This review article synthesizes evidence from randomized controlled trials (RCTs) and systematic reviews (SRs) that examined one or more of the above as treatments for OA. Medline, Pubmed, and Cinahl databases were searched to identify English-language articles using an RCT design or that conducted a SR of published studies and presented data on symptom or functional outcomes. Two authors independently abstracted relevant information (e.g., study sample, intervention characteristics, treatment effects, safety data). Retained articles (n = 29) included those that evaluated tai chi (8 RCTs, 2 SRs), acupuncture (11 RCTs, 4 SRs), yoga (2 RCTs), and massage therapy (2 RCTs). Available evidence indicates that tai chi, acupuncture, yoga, and massage therapy are safe for use by individuals with OA. Positive short-term (≤ 6 months) effects in the form of reduced pain and improved self-reported physical functioning were found for all 4 treatments. Limited information exists regarding the relative effectiveness of the therapies (e.g., yoga vs. tai chi vs. acupuncture), as well as treatment effects in persons with joint involvement besides the knee and in distinct patient subgroups (e.g., older vs. younger adults, persons with mild vs. moderate vs. advanced disease). Complementary therapies can reduce pain and improve function in adults with OA. Research is needed to evaluate long-term benefits of the treatments, as well as their relative effects among diverse patient subgroups.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3857560/>

Development of a manualized protocol of massage therapy for clinical trials in osteoarthritis

Ali A, Kahn J, Rosenberger L & Perlman AI.

Trials, 2012, 13:185.

Clinical trial design of manual therapies may be especially challenging as techniques are often individualized and practitioner-dependent. This paper describes our methods in creating a standardized Swedish massage protocol tailored to subjects with osteoarthritis of the knee while respectful of the individualized nature of massage therapy, as well as implementation of this protocol in two randomized clinical trials. The manualisation process involved a collaborative process between methodologic and clinical experts, with the explicit goals of creating a reproducible semi-structured protocol for massage therapy, while allowing some latitude for therapists' clinical judgment and maintaining consistency with a prior pilot study. The manualized protocol addressed identical specified body regions with distinct 30- and 60-min protocols, using standard Swedish strokes. Each protocol specifies the time allocated to each body region. The manualized 30- and 60-min protocols were implemented in a dual-site 24-week randomized dose-finding trial in patients with osteoarthritis of the knee, and is currently being implemented in a three-site 52-week efficacy trial of manualized Swedish massage therapy. In the dose-finding study, therapists adhered to the protocols and significant treatment effects were demonstrated. The massage protocol was manualized, using standard techniques, and made flexible for individual practitioner and subject needs. The protocol has been applied in two randomized clinical trials. This manualized Swedish massage protocol has real-world utility and can be readily utilized both in the research and clinical settings.

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3519579/>

Massage therapy for osteoarthritis of the knee: A randomized dose-finding trial

Perlman AI, Ali A, Njike VY, Hom D, Davidi A, Gould-Fogerite S, Milak C & Katz DL.

PLoS One, 2012, 7(2):e30248.

In a previous trial of massage for osteoarthritis (OA) of the knee, we demonstrated feasibility, safety and possible efficacy, with benefits that persisted at least 8 weeks beyond treatment termination. We performed a RCT to identify the optimal dose of massage within an 8-week treatment regimen and to further examine durability of response. Participants were 125 adults with OA of the knee, randomized to one of four 8-week regimens of a standardized Swedish massage regimen (30 or 60 min weekly or biweekly) or to a Usual Care control. Outcomes included the Western Ontario and McMaster Universities Arthritis Index (WOMAC), visual analogue pain scale, range of motion, and time to walk 50 feet, assessed at baseline, 8-, 16-, and 24-weeks. WOMAC Global scores improved significantly (24.0 points, 95% CI ranged from 15.3-32.7) in the 60-minute massage groups compared to Usual Care (6.3 points, 95% CI 0.1-12.8) at the primary endpoint of 8-weeks. WOMAC subscales of pain and functionality, as well as the visual analogue pain scale also demonstrated significant improvements in the 60-minute doses compared to usual care. No significant differences were seen in range of motion at 8-weeks, and no significant effects were seen in any outcome measure at 24-weeks compared to usual care. A dose-response curve based on WOMAC Global scores shows increasing effect with greater total time of massage, but with a plateau at the 60-minute/week dose. Given the superior convenience of a once-weekly protocol, cost savings, and consistency with a typical real-world massage protocol, the 60-minute once weekly dose was determined to be optimal, establishing a standard for future trials.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3275589/>

October 2016		CEUs
26-30	Short Course in Certified Infant Massage Instruction. Presented by Glenda Chapman. Adelaide, SA Contact 02 6262 4346 or support@iaim.org.au www.iaim.org.au Class runs 26, 27, 28 and 30 October (No class runs on Saturday 29th)	140
29-30	Onsen Techniques® Volume 4 Functional Assessments & Treatments of the Upper Body. Presented by Jeff Murray. Kingscliff, NSW Contact info@beyondmassage.com.au www.beyondmassage.com.au	70
29-30	Myofascial Cupping Technique™. Presented by David Sheehan. Ardross, WA Contact 03 9481 6723 or info@comphs.com.au www.comphs.com.au	70
30	Rocktape Introduction Course - Half Day. Presented by Rocktape. Perth, WA Contact 08 9379 3400 or education@rocktape.com.au rocktape.com.au	20
31	Understanding Fibromyalgia Guided Study Online Workshop. Developed by Bradley Collins. Contact info@thetherapyweb.com www.thetherapyweb.com This course can be started anytime throughout the year and can be completed at your own pace	25
November 2016		CEUs
3-7	Short Course in Certified Infant Massage Instruction. Presented by Glenda Chapman. Perth, WA Contact 02 6262 4346 or support@iaim.org.au www.iaim.org.au Class runs 3, 4, 5 and 7 November (No class runs on Sunday 6th)	140
4-8	Neurostructural Integration Technique Basic. Presented by Marianna Granger. Coolup, WA Contact 0407 036 047 Email: marianne_g@westnet.com.au	175
4-6	Oncology Massage Module Two. Presented by Amy Tyler. Castle Hill, NSW Contact Kylie Higgins 0408 077 123 www.oncologymassagetraining.com.au	105
4	Evidence based Relaxation Therapy: Physiological & Psychological Benefits. Presented by Judy Lovas. Sydney, NSW. Contact judymlovas@gmail.com www.artandscienceofrelaxation.com	15
4-8	Neurostructural Integration Technique Basic. Presented by Robert Munro. Brisbane, QLD Contact 0448 428 020 Email: saramcl@gmail.com	175
4	CORE Myofascial Therapy - Introductory Lecture. Presented by George Kousaleos. Leura, NSW Contact Martina Larsen 0408 102 046 or awareness@aapt.net.au	35
5-7	Master Class in Traditional East-West Cupping. Presented by Bruce Bentley. Sydney, NSW. Contact 03 9576 1787. www.healthtraditions.com.au	105
5-6	Myofascial Cupping Technique™. Presented by David Sheehan. Melbourne, VIC Contact 03 9481 6723 or info@comphs.com.au www.comphs.com.au	70
5-6	Head, Neck and Jaw - FRSB. Presented by Julie Hammond. Perth, WA. Contact 0415 707 130 or info@anatomytrainsaustralia.com www.anatomytrainsaustralia.com	70
5	Rocktape Introduction Course - Full Day. Presented by Rocktape. Adelaide, SA. Contact 08 9379 3400 or education@rocktape.com.au rocktape.com.au	35
5-9	Advanced Certificate in Integrated Cupping Therapy. Presented by Bruce Bentley. Sydney, NSW Contact 03 9576 1787 www.healthtraditions.com.au	175
5-6	CORE Myofascial Therapy. Presented by George Kousaleos. Leura, NSW. Contact Martina Larsen 0408 102 046 or awareness@aapt.net.au	70
6	Rocktape Introduction Course - Full Day. Presented by Rocktape. Rockhampton, QLD. Contact 08 9379 3400 or education@rocktape.com.au rocktape.com.au	35
6	Rocktape Introduction Course - Full Day. Presented by Rocktape. Townsville, QLD. Contact 08 9379 3400 or education@rocktape.com.au rocktape.com.au	35
6	Rocktape Introduction Course - Half Day. Presented by Rocktape. Melbourne, VIC. Contact 08 9379 3400 or education@rocktape.com.au rocktape.com.au	20
6	Employment and Super: Know your Rights, Know your Responsibilities. Presented by Ross Ashcroft. Sydney, NSW. Read more or register by downloading the workshop flyer here	35
8-9	Modern Cupping Therapy. Presented by Bruce Bentley. Sydney, NSW. Contact 03 9576 1787 www.healthtraditions.com.au	70
11-13	CORE Myofascial Therapy 1. Presented by George Kousaleos. Sydney, NSW. Contact Budiman 0402 059 570 or terraroza@gmail.com Register at www.terraroza.com.au	105

Calendar of events

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12	Rocktape Introduction Course - Full Day. Presented by Rocktape. Perth, WA. Contact 08 9379 3400 or education@rocktape.com.au rocktape.com.au	35
12	Rocktape Introduction Course - Full Day. Presented by Rocktape. Gold Coast, QLD. Contact 08 9379 3400 or education@rocktape.com.au rocktape.com.au	35
12-13	Head, Neck and Jaw - FRBSB. Presented by Julie Hammond. Sydney, NSW. Contact 0415 707 130 or info@anatomytrainsaustralia.com www.anatomytrainsaustralia.com	70
13	Rocktape Introduction Course - Full Day. Presented by Rocktape. Sydney, NSW. Contact 08 9379 3400 or education@rocktape.com.au rocktape.com.au	35
13	Rocktape Introduction Course - Full Day. Presented by Rocktape. Albury, NSW. Contact 08 9379 3400 or education@rocktape.com.au rocktape.com.au	35
14-16	CORE Myofascial Therapy 2. Presented by George Kousaleos. Sydney, NSW. Contact Budiman 0402 059 570 or terrarosa@gmail.com Register at www.terrarosa.com.au	105
19-23	Advanced Certificate in Integrated Cupping Therapy. Presented by Bruce Bentley. Melbourne, VIC. Contact 03 9576 1787 www.healthtraditions.com.au	175
19-21	CORE Sports and Performance Bodywork. Presented by George Kousaleos. Sydney, NSW. Contact Budiman 0402 059 570 or terrarosa@gmail.com Register at www.terrarosa.com.au	105
19-20	Neurostructural Integration Technique Introductory. Presented by Wendy Eyles. Sydney, NSW. Contact 0412 417 719. Email: harmony4massage@gmail.com	70
19-21	Master Class in Traditional East-West Cupping. Presented by Bruce Bentley. Melbourne, VIC. Contact 03 9576 1787 www.healthtraditions.com.au	105
19-20	Chi-Acupressure. Presented by Master Zhang Hao. Strathfield, NSW. Contact 0416 286 899 www.chihealing.com.au	70
20	Rocktape Introduction Course - Full Day. Presented by Rocktape. Sunshine Coast, QLD. Contact 08 9379 3400 or education@rocktape.com.au rocktape.com.au	35
22-23	Modern Cupping Therapy. Presented by Bruce Bentley. Melbourne, VIC. Contact 03 9576 1787 www.healthtraditions.com.au	70
25-26	Anatomy Trains in Training I. Presented by Ari-Pekka Lindberg. Perth, WA. Contact 0415 707 130 or info@anatomytrainsaustralia.com www.anatomytrainsaustralia.com	70
25-29	Short Course in Certified Infant Massage Instruction. Presented by Glenda Chapman. Melbourne, VIC. Contact 02 6262 4346 or support@iaim.org.au www.iaim.org.au Class runs 25, 26, 27 and 29 November (No class runs on Monday 28th)	140
25-27	Oncology Massage Module Two. Presented by Kate Butler. Melbourne, VIC. Contact Kylie Higgins 0408 077 123 www.oncologymassagetraining.com.au	105
25	Evidence based Relaxation Therapy: Physiological & Psychological Benefits. Presented by Judy Lovas. Brisbane, QLD. Contact judymlovas@gmail.com www.artandscienceofrelaxation.com	15
26-27	Neurostructural Integration Technique Introductory. Presented by Angela Lane. Melbourne, VIC. Contact 0402 744 719. Email: angelane1@optusnet.com.au	70
26-28	Oncology Massage Module One. Presented by Tania Shaw. Mackay, QLD. Contact Kylie Higgins 0408 077 123 www.oncologymassagetraining.com.au	105
26	Rocktape Introduction Course - Full Day. Presented by Rocktape. Brisbane, QLD. Contact 08 9379 3400 or education@rocktape.com.au rocktape.com.au	35
27-28	Anatomy Trains in Training II. Presented by Ari-Pekka Lindberg. Perth, WA. Contact 0415 707 130 or info@anatomytrainsaustralia.com www.anatomytrainsaustralia.com	70
27	ACT Branch Meeting. Weston, ACT. Contact Irina Ivankovitch 0438 235 333	15
27	Rocktape Introduction Course - Full Day. Presented by Rocktape. Melbourne, VIC. Contact 08 9379 3400 or education@rocktape.com.au rocktape.com.au	35
29	Illawarra Branch Annual General Meeting and Christmas Dinner. Unanderra, NSW. Contact Linda White 0417 671 007	15

Calendar of events

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December 2016		CEUs
1-2	Anatomy Trains in Training I. Presented by Ari-Pekka Lindberg. Sydney, NSW. Contact 0415 707 130 or info@anatomytrainsaustralia.com www.anatomytrainsaustralia.com	70
2-11	KMI Part 2 - Structural Balance Certification Module. Presented by Don Thompson and Julie Hammond. Sydney, NSW. Contact 0415 707 130 or info@anatomytrainsaustralia.com www.anatomytrainsaustralia.com Course duration 8 days commencing 2/12/16 and concludes 11/12/16	280
3-4	Acu-Reflexology. Presented by Master Zhang Hao. Strathfield, NSW. Contact 0416 286 899. www.chihealing.com.au	70
3-5	Oncology Massage Module Two. Presented by Tania Shaw. Maroochydore, QLD. Contact Kylie Higgins 0408 077 123 www.oncologymassagetraining.com.au	105
3-4	Anatomy Trains in Training II. Presented by Ari-Pekka Lindberg. Sydney, NSW. Contact 0415 707 130 or info@anatomytrainsaustralia.com www.anatomytrainsaustralia.com	70
7-11	Neurostructural Integration Technique Basic. Presented by Wendy Eyles. Sydney, NSW. Contact 0412 417 719. Email: harmony4massage@gmail.com	175
14	North Shore and Northern Beaches Branch Meeting. Belrose, NSW. Contact Brenda 0410 353 913	15
31	The Shoulder Online Workshop. Developed by Bradley Collins. Contact info@thetherapyweb.com www.thetherapyweb.com This course can be started anytime throughout the year and can be completed at your own pace	25

Employment and Super: Know your Rights, Know your Responsibilities

When: Sunday 6 November 2016
Time: Registration 9.15am
Workshop 9.30am - 4.30pm
Where: Australasian College of
Natural Therapies
Level 5
235 Pyrmont Street
Pyrmont, Sydney

Reward: 35 CEUs
Cost: \$150 members
\$200 non-members
\$100 students

ABOUT THE WORKSHOP

Do you get confused about your obligations relating to employment? Are you a therapist wondering what your rights are in the workplace? AMT has arranged for an experienced professional to facilitate an interactive seminar to help you understand your rights and obligations in relation to employment and superannuation.

Topics covered will include:

- basics of the Australian legal system and why it is important to understand the concept of jurisdiction
- the difference between employment and contracting relationships under Fair Work legislation and common law, and the consequences of getting it wrong
- the obligations relating to superannuation for staff (whether they are employees and contractors under Fair Work legislation, as well as ATO legislation and rulings) and the consequences of getting it wrong
- record keeping requirements for business
- setting up systems and checklists for compliance with legal obligations
- where to go for help, including important questions to ask regulators or professionals when seeking further assistance.

The facilitator, Ross Ashcroft, will provide practical examples relating to the massage and natural health professions to ensure the session is both informative and interactive. They will also present case studies to give participants an opportunity to 'test' their knowledge in practical scenarios so they will feel more empowered to implement (or modify) their systems where necessary, or to enforce their rights where they may have been breached.

Participants are encouraged to bring in samples of contracts they have drawn up or been given to discuss during the interactive sessions.

ABOUT THE PRESENTER

Ross Ashcroft



Ross is a qualified remedial massage therapist, personal trainer and former lawyer with a passion for making human rights and legal issues accessible to non-lawyers

and corporate workers alike. During his career as a lawyer, he held various roles in a small private practice, health sector regulation, research and academia. He went on to sit on various State, National and International committees and Boards/Panels, including Co-Chairing Australian Lawyers for Human Rights (Queensland), serving a term as the Chair of the Human Rights Law Committee in the International Bar Association and working with the UNESCO Chair & Institute of Comparative Human Rights, where he has been a Senior Facilitator of the Intergenerational Leadership Forum. Whilst holding these positions, he published in professional and academic journals in Australia and internationally as both a sole and joint author, including co-authoring book chapters with leading environmental lawyers and the Chair of the United Nations Working Group on Arbitrary Detention.

You can connect with Ross on LinkedIn here
<https://au.linkedin.com/in/ross-ashcroft-3a8a01b3>

Registration info

Please find enclosed:

\$150.00 AMT Member

\$200.00 non-members

\$100.00 students

TOTAL \$

Cheque or Money Order (made out to AMT)

EFT (see payment details below)

Or please debit my visa/mastercard

AMT Membership number:

PLEASE PROVIDE YOUR DETAILS BELOW

First name:

Surname:

Address:

Phone number:

Email address:

Cardholder's Name:

Card Number:

Cardholder's Signature:

Expiry Date:

/

PLEASE NOTE AMT DOES NOT ACCEPT THIRD PARTY PAYMENTS

AMT REFUND POLICY

- Cancellation up to 4 weeks prior – **full refund**
- Cancellation less than 4 weeks but more than 2 weeks – **less 15%**
- Cancellation less than 2 weeks but more than 1 week – **less 25%**
- Cancellation less than 1 week – **less 50%**
- No refund will be given after the event

EFT PAYMENT DETAILS

PLEASE USE YOUR NAME UNDER THE TRANSACTION DESCRIPTION SO WE CAN IDENTIFY THE PAYMENT AND SEND THIS FORM BACK TO AMT

Account Name: Association of Massage Therapists Ltd

BSB: 062-212

Account Number: 1034-0221

Please return to:
AMT Ltd, PO Box 826
Broadway NSW 2007
or fax 02 9211 2281



PO Box 826
Broadway NSW 2007
Phone: 02 9211 2441
Fax: 02 9211 2281
e-mail: info@amt.org.au

www.amt.org.au