



Certified Kinesio Taping Practitioner®

With an ever growing foundation of health professionals desiring and willing to become certified in the Kinesio Taping® Method, The Kinesio Taping Association International (KTAI) has designed a certification process that will allow dedicated practitioners to earn their designation as a Certified Kinesio Taping Practitioner® (CKTP®).

In order to become recognized as a CKTP through the KTAI the following protocols are required:

- Attend and complete KTAI approved KT1, KT2, and KT3 level courses.
- After completion of the necessary courses, complete the CKTP Exam Request Form.
- All exams are handled online. Once The KTAI has received the information needed, you will then receive via email instructions for taking the online exam.
- If you fail to receive a passing grade of 80% or above, you must request a retake. This is not automatic. Your one free retake will only be available 30 days from the time your email is received.
- As of January 2011, the KTAI has introduced a CKTP Certification Mark License Agreement which is a requirement to be recognized as a CKTP. As part of this agreement, a current membership to the KTAI is required.

Benefits of becoming a CKTP:

- You may add the designation of CKTP to your business card and letterhead.
- Eligible to assist at approved Kinesio Taping Seminars as a lab assistant. Please email Christina Schell at cschell@kinesiotaping.com with your full contact information.
- Eligible to apply to become a Certified Kinesio Taping Instructor (CKTI) when the instructor certification program is offered (typically in cycles of 3 years).
- Option of being recognized and listed by name and location on the Kinesio website for patient referral. (CKTP Elite membership is required)
- Eligible to submit case studies/research for annual US and International Kinesio Taping Symposiums.
- Eligible to submit articles of interest to quarterly publication Advance Healing.

Certified Kinesio Taping Practitioner (CKTP) Exam & Certificate Request Form

Name: _____ Title: _____

Student: Y / N If Yes, Expected Date of Graduation _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Email: _____

Employer: _____

Work Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Fax: _____

Course Information:

City(s) _____ State(s): _____

Date(s): _____ Instructor(s): _____

Course Codes: KT1 _____ KT2 _____ KT3 _____

Type of course (Check all that apply):

PEDIATRIC LYMPHEDEMA UPPER EXTREMITY LOWER EXTREMITY WHOLE BODY OTHER

Payment Amount: \$99.00: includes: Exam fee, CKTP Certification Certificate.

******Student Payment Amount \$74.00****** includes exam only: upon graduation student may request CKTP certificate and become a CKTP. To receive your certificate send a copy of diploma, test score and a check for \$25.

Credit Card: Payment Amount: \$ _____

Credit Card: DISCOVER VISA MC AMEX

Check # or Card #: _____

CCV: _____ Expiration Date: _____

Card Holder Name: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Please Mail, Email or Fax:

- Exam request form
- Copy of your course completion certificate(s)
- If you do not have this please contact the course provider or instructor and request the certificate the course codes
- \$99.00 fee / (\$74.00 exam fee - student only).

Please make check payable to: Kinesio Taping Association International, ATTN: Certification, 3901 Georgia St. NE, Suite F2, Albuquerque, NM 87110

Your signature below authorizes the Kinesio Taping Association to use the above information, provided by you, in connection with the Kinesio Taping Association and that the information provided is true and accurate. Providing false information may jeopardize your status as a CKTP.

Signature: _____ Date: _____