



Board of Body Art Practitioners

Body Art Special Event

Application Manual

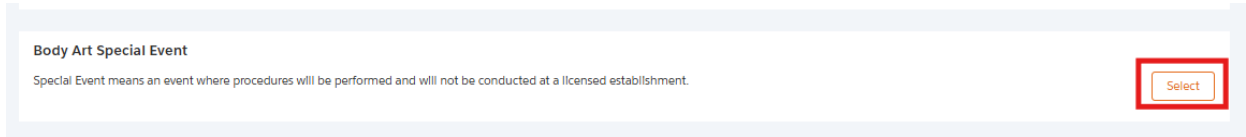
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Application for Body Art Special Event

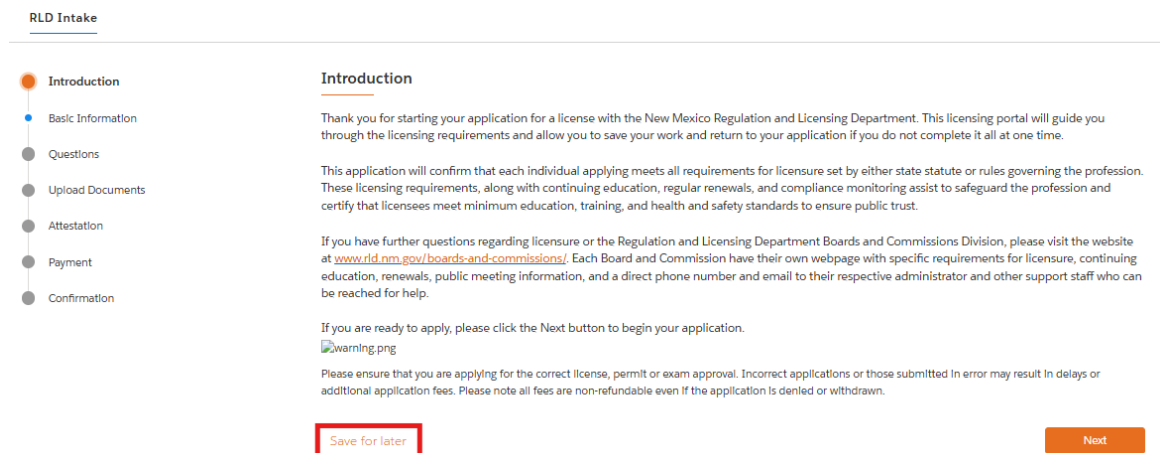
| | |
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Application for Body Art Special Event

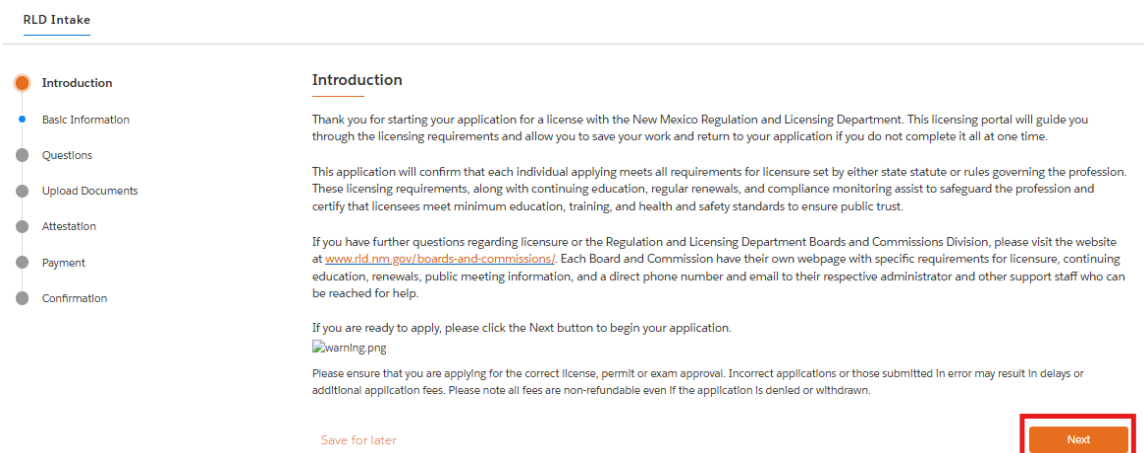
1. Click the “Select” button to the right of the Body Art Special Event license type.



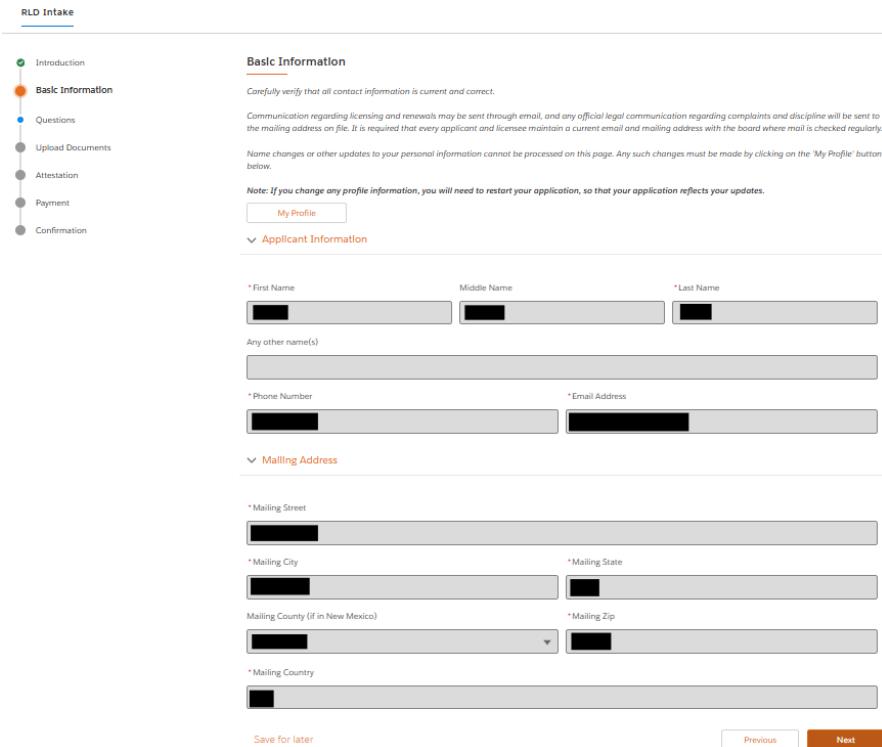
2. At any time of the application, you can select the “Save for later” option to save a draft of the application that you can return to and complete at your convenience. This will ensure you don’t lose any progress you have made if you can’t complete the application in one sitting.



3. On the Introduction page, read through the information and select the “Next” button on the bottom right of the screen when you are done.



4. On the Basic Information page, verify that all information is valid and up to date.



RLD Intake

- Introduction
- Basic Information**
- Questions
- Upload Documents
- Attestation
- Payment
- Confirmation

Basic Information

Carefully verify that all contact information is current and correct.

Communication regarding licensing and renewals may be sent through email, and any official legal communication regarding complaints and discipline will be sent to the mailing address on file. It is required that every applicant and licensee maintain a current email and mailing address with the board where mail is checked regularly.

Name changes or other updates to your personal information cannot be processed on this page. Any such changes must be made by clicking on the 'My Profile' button below.

Note: If you change any profile information, you will need to restart your application, so that your application reflects your updates.

[My Profile](#)

Applicant Information

*First Name Middle Name *Last Name

Any other name(s)

*Phone Number *Email Address

Mailing Address

*Mailing Street

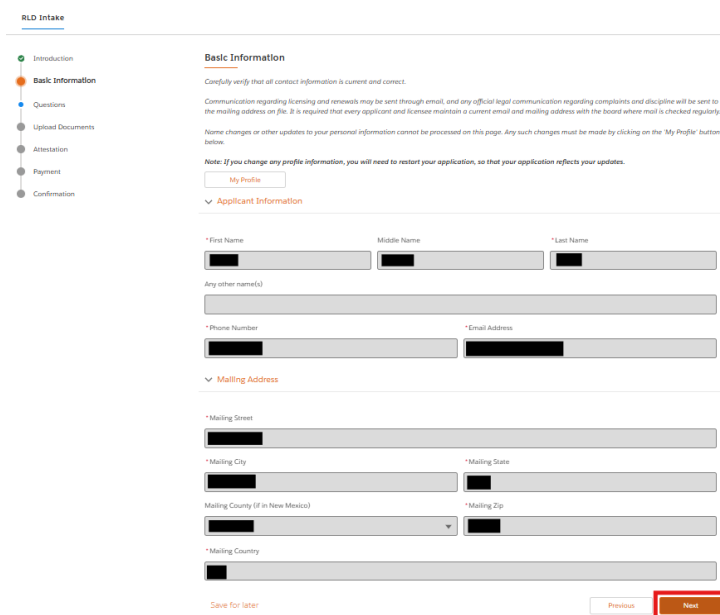
*Mailing City *Mailing State

Mailing County (if in New Mexico) *Mailing Zip

*Mailing Country

Save for later Previous Next

a. If Yes, select the “Next” button at the bottom right of the page.



RLD Intake

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Basic Information

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[My Profile](#)

Applicant Information

*First Name Middle Name *Last Name

Any other name(s)

*Phone Number *Email Address

Mailing Address

*Mailing Street

*Mailing City *Mailing State

Mailing County (if in New Mexico) *Mailing Zip

*Mailing Country

Save for later Previous **Next**

b. If No, select the “My Profile” button at the top left to update your information.

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- Confirmation

Basic Information

Carefully verify that all contact information is current and correct.

Communication regarding licensing and renewals may be sent through email, and any official legal communication regarding complaints and discipline will be sent to the mailing address on file. It is required that every applicant and licensee maintain a current email and mailing address with the board where mail is checked regularly.

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Note: If you change any profile information, you will need to restart your application, so that your application reflects your updates.

[My Profile](#)

▼ Applicant Information

*First Name Middle Name *Last Name

Any other name(s)

i. Select the "Edit" button at the bottom right of the page.

My Profile

▼ Person Information

*First Name Middle Name *Last Name

Have you ever used another name under which records relating to your application, education, training or experience may be filed?

Race Ethnicity Preferred Language Are you a New Mexico Resident?

Date of Birth Gender

Primary Phone No Business Phone No

Identifier Type Identifier Number

▼ Mailing Address

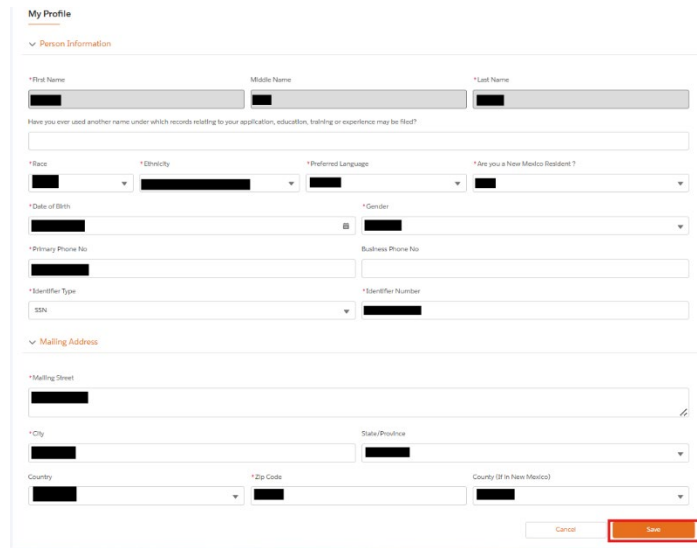
Mailing Street

City State/Province

Country Zip Code County (If in New Mexico)

[Edit](#)

ii. Enter in all relevant updated data and select "Save" at the bottom right when completed.



My Profile

Person Information

*First Name [Redacted] Middle Name [Redacted] Last Name [Redacted]

Have you ever used another name under which records relating to your application, education, training or experience may be filed?
[Redacted]

*Race [Redacted] *Ethnicity [Redacted] *Preferred Language [Redacted] *Are you a New Mexico Resident? [Redacted]

*Date of Birth [Redacted] *Gender [Redacted]

*Primary Phone No. [Redacted] Business Phone No. [Redacted]

*Identifier Type: SSN [Redacted] *Identifier Number [Redacted]

Mailing Address

*Mailing Street [Redacted]

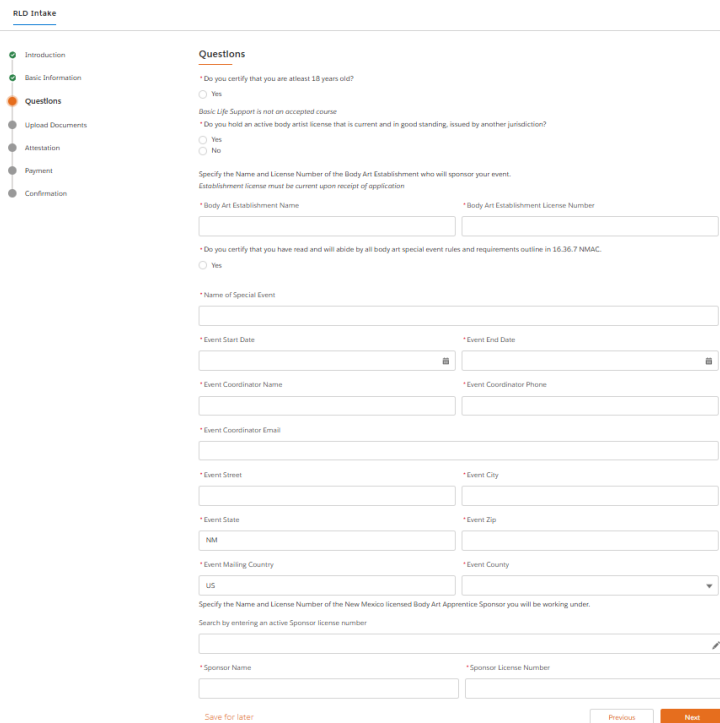
*City [Redacted] State/Province [Redacted]

Country [Redacted] *Zip Code [Redacted] County (if in New Mexico) [Redacted]

Cancel Save

iii. You will need to restart your application to ensure the updated data is listed. Return to “Step 1: Body Art Special Event Application” to continue.

5. On the Questions page, please answer all questions accurately with the most recent information. Please provide any relevant details in the box below any questions marked with “Yes.” You are also required to upload any related documentation and other supporting documents on the Uploaded Documents page, later in this application.



BLD Intake

- Introduction
- Basic Information
- Questions**
- Upload Documents
- Attestation
- Payment
- Confirmation

Questions

* Do you certify that you are at least 18 years old?
 Yes
 No

Basic Life Support is not an accepted course

* Do you hold an active body art license that is current and in good standing, issued by another jurisdiction?
 Yes
 No

Specify the Name and License Number of the Body Art Establishment who will sponsor your event. Establishment license must be current upon receipt of application

* Body Art Establishment Name [Redacted] * Body Art Establishment License Number [Redacted]

* Do you certify that you have read and will abide by all body art special event rules and requirements outline in 10.36.7 NMAC.
 Yes

* Name of Special Event [Redacted]

* Event Start Date [Redacted] * Event End Date [Redacted]

* Event Coordinator Name [Redacted] * Event Coordinator Phone [Redacted]

* Event Coordinator Email [Redacted]

* Event Street [Redacted] * Event City [Redacted]

* Event State [Redacted] * Event Zip [Redacted]

* Event Mailing Country [Redacted] * Event County [Redacted]

Specify the Name and License Number of the New Mexico licensed Body Art Apprentice Sponsor you will be working under.

Search by entering an active Sponsor license number

* Sponsor Name [Redacted] * Sponsor License Number [Redacted]

Save for later Previous Next

- To complete the Questions page, select the “Next” button at the bottom right of the page.

RLD Intake

- Introduction
- Basic Information
- Questions**
- Upload Documents
- Attestation
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- Confirmation

Questions

* Do you certify that you are atleast 18 years old?
 Yes

Basic Life Support is not an accepted course
 * Do you hold an active body artist license that is current and in good standing, issued by another jurisdiction?
 Yes
 No

Specify the Name and License Number of the Body Art Establishment who will sponsor your event.
 Establishment license must be current upon receipt of application

* Body Art Establishment Name:

* Body Art Establishment License Number:

* Do you certify that you have read and will abide by all body art special event rules and requirements outline in 16.36.7 NMAC?
 Yes

* Name of Special Event:

* Event Start Date:

* Event End Date:

* Event Coordinator Name:

* Event Coordinator Phone:

* Event Coordinator Email:

* Event Street:

* Event City:

* Event State:

* Event Zip:

* Event Mailing Country:

* Event County:

Specify the Name and License Number of the New Mexico licensed Body Art Apprentis Sponsor you will be working under.
 Search by entering an active Sponsor license number

* Sponsor Name:

* Sponsor License Number:




Save for later Previous **Next**

- On the Upload Documents page, attach all requested and relevant documents to their designated column if required.

RLD Intake

- Introduction
- Basic Information
- Questions
- Upload Documents**
- Attestation
- Payment
- Confirmation

Upload Documents

| Document Name | Document Description | Upload a New File | Uploaded Files | Delete |
|---|---|---|----------------|--------|
| * Active License(s) from Other State(s) | Official verification of active License(s) In similar profession In another State(s). Photocopy of license Is not acceptable. |  | | |
| * List of Participating Artists | |  | | |
| Other Supporting Documents | Any supporting documents that could assist In review of the application. |  | | |




Save for later Previous **Next**

- Select the blue upload icon in each section to upload a document.

RLD Intake

- Introduction
- Basic Information
- Questions
- Upload Documents**
- Attestation
- Payment
- Confirmation

Upload Documents

| Document Name | Document Description | Upload a New File | Uploaded Files | Delete |
|---|---|---|----------------|--------|
| • Active License(s) from Other State(s) | Official verification of active License(s) in similar profession in another State(s). Photocopy of license is not acceptable. |  | | |
| • List of Participating Artists | |  | | |
| Other Supporting Documents | Any supporting documents that could assist in review of the application. |  | | |

Save for later Previous **Next**

- b. Review the document size and type requirements before uploading, then select the Upload File button.

Upload

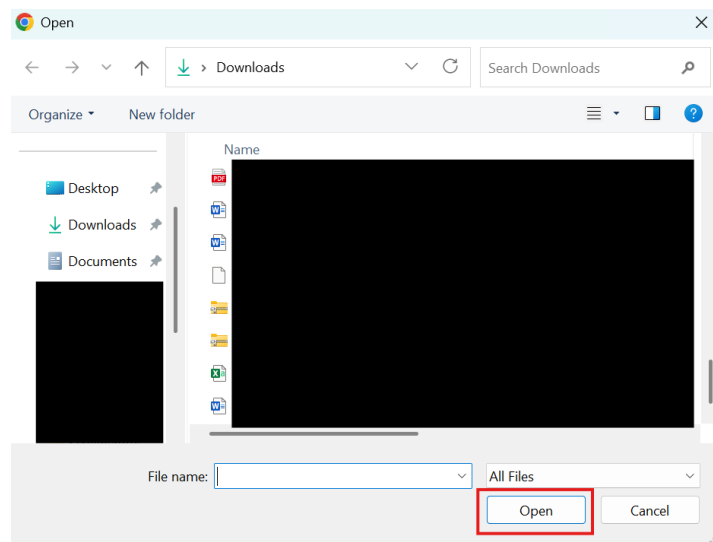
Please attach a copy of the required document.

Note that:

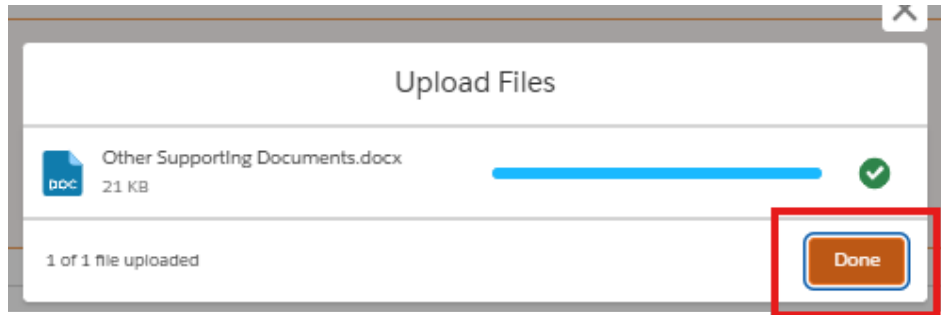
1. File size should not exceed 10MB.
2. File extensions will be accepted only of type doc, docx, pdf, png, ppt, pptx, xls, xlsx.
3. Documents may be uploaded as individual files or as a single merged file on this next page.

 Upload Files **Done**

- c. Select the appropriate document from your files and then select “Open”



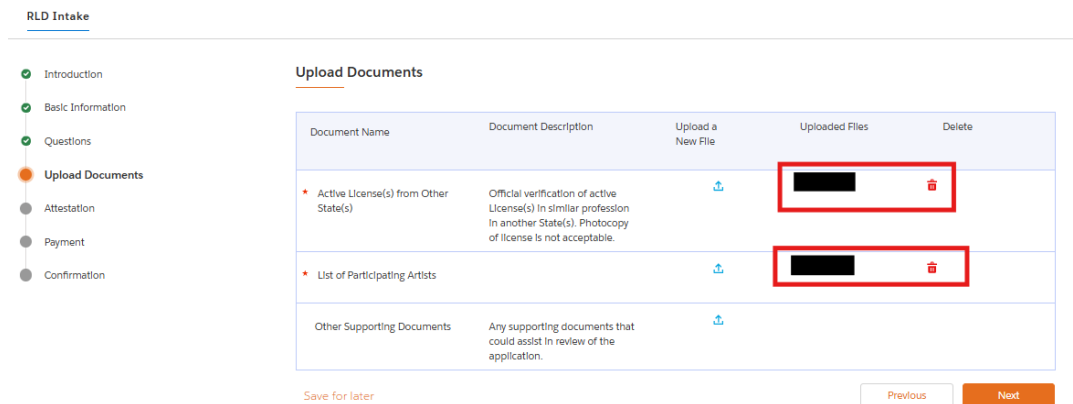
- d. The file will notify you when it's completed. Select the “Done” button when it's completed.



e. You will be able to see your document added and can then select the “Close” option.



f. You will be able to see the documents in each section once you have completed the uploads.



g. Once all documents are added, select the orange “Next” button.

RLD Intake

- Introduction
- Basic Information
- Questions
- Upload Documents
- Attestation
- Payment
- Confirmation

Upload Documents

| Document Name | Document Description | Upload a New File | Uploaded Files | Delete |
|---|---|-------------------|----------------|--------|
| * Active License(s) from Other State(s) | Official verification of active License(s) in similar profession in another State(s). Photocopy of license is not acceptable. | | | |
| * List of Participating Artists | | | | |
| Other Supporting Documents | Any supporting documents that could assist in review of the application. | | | |

Save for later

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Next

8. On the Attestation page, review the statement on the screen. Then select the checkbox to certify your agreement. After, enter your name and select the "Next" button at the bottom right.

RLD Intake

- Introduction
- Basic Information
- Questions
- Upload Documents
- Attestation
- Payment
- Confirmation

Attestation

Application Attestation

I hereby certify that I am the person described and identified in this application; this application contains no willful misrepresentation; and the information given by me is true and complete to the best of my knowledge and belief. I further certify I will, upon receipt, read the New Mexico Dental Health Care Act and Rules and fully understand that I bind myself to be governed by them.

* Applicant Name

Date

Save for later

Previous

Next

9. On the Payment page, review the notice before making any selections.

RLD Intake

- Introduction
- Basic Information
- Questions
- Upload Documents
- Attestation
- Payment
- Confirmation

Payment

Select your mode of payment and click "Pay and Submit" to input your payment information. Payments made with a Visa or Mastercard will be charged a 2.5% transaction fee. This is a fee imposed directly by the bank, and no portion of the fee is paid to or collected by the RLD. Payments made by e-check will not result in any transaction fee.

Note: Only select "Operating Transfer" if your fee will be paid by another New Mexico state agency and you have received formal confirmation from the agency that it is transferring the funds to RLD through an operating transfer. Renewals will not be approved until an operating transfer is confirmed by RLD. If this option is selected, users can bypass the fee payment.

* Mode of Payment

The amount to be paid is \$

Please click the Pay & Submit button to proceed with the payment.

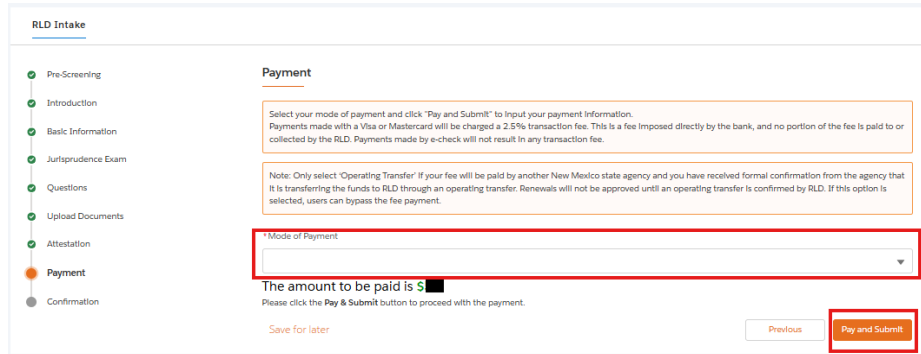
Save for later

Previous

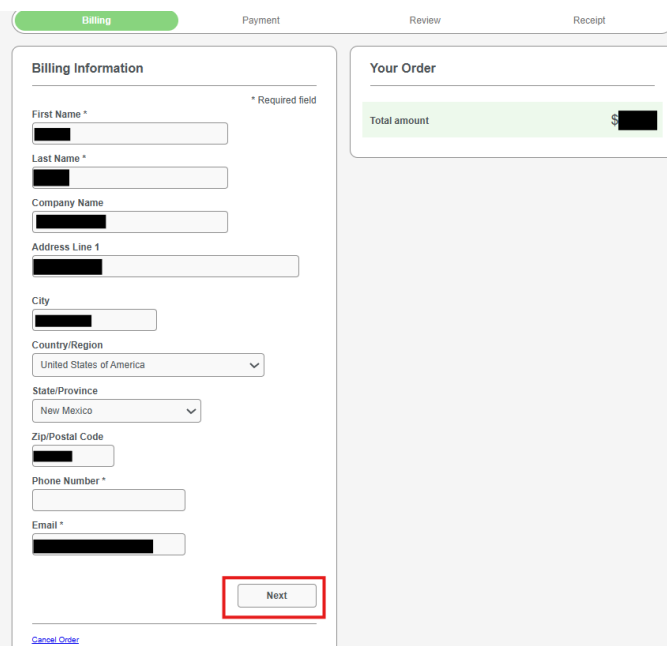
Pay and Submit

- a. Select a Mode of Payment then the "Pay and Submit" button. When selecting either Credit Card (Visa or Mastercard) or E-Check as your payment method, a new tab will open directing you to the Cybersource Payment Gateway screen. Please disable any pop-up blockers to ensure the page opens correctly in the new tab.

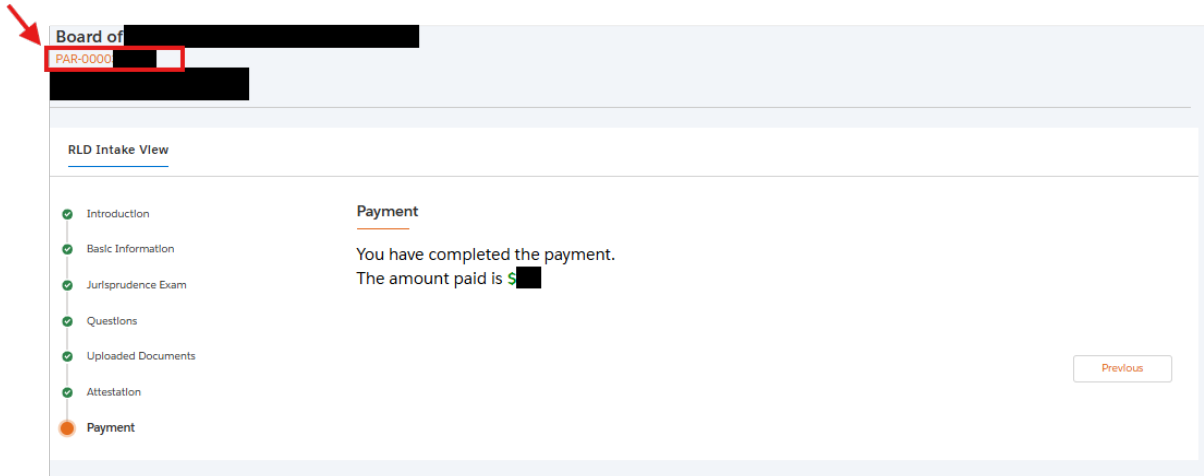
- b. *Note: Payment is a separate system and your credit card info is not stored or saved by RLD. Cybersource is a SoNM billing platform, and this is not phishing or other malware. Upon payment completion, you will receive a payment receipt to the email address you have entered in the Payment Gateway.*



- c. Ensure all required fields are completed and click “Next” button to proceed through entire payment.



10. Once your payment is completed, your application is now complete and will be submitted for approval. To check the status of your application, please contact your board or division directly. Please be sure to reference your application number, which begins with **PAR-** and can be found at the top of your application.



Board of [redacted]
PAR-0000 [redacted]

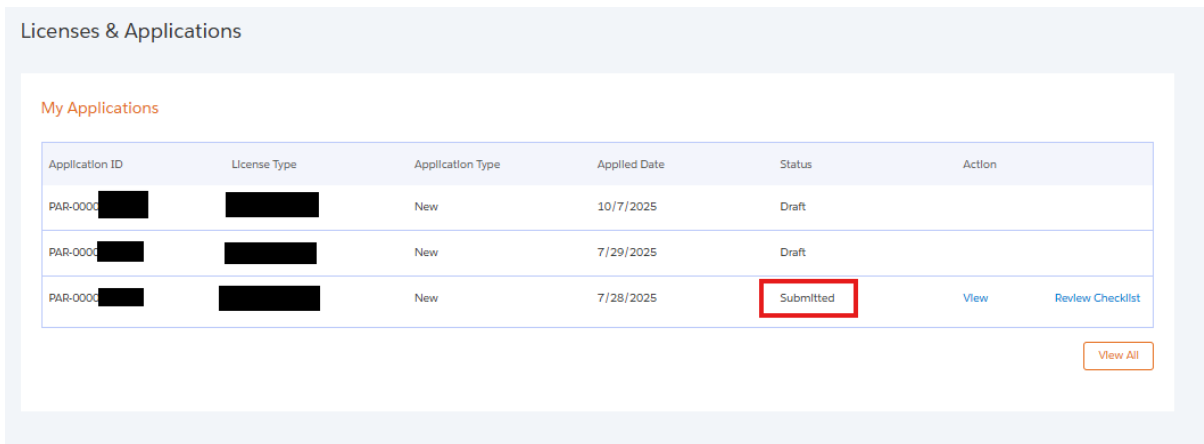
RLD Intake View

- Introduction
- Basic Information
- Jurisprudence Exam
- Questions
- Uploaded Documents
- Attestation
- Payment**

Payment
You have completed the payment.
The amount paid is \$ [redacted]

Previous

11. On the home page, the application will appear under My Applications with **Submitted** status.



Licenses & Applications

My Applications

| Application ID | License Type | Application Type | Applied Date | Status | Action |
|---------------------|--------------|------------------|--------------|------------------|---|
| PAR-0000 [redacted] | [redacted] | New | 10/7/2025 | Draft | |
| PAR-0000 [redacted] | [redacted] | New | 7/29/2025 | Draft | |
| PAR-0000 [redacted] | [redacted] | New | 7/28/2025 | Submitted | View Review Checklist |

View All