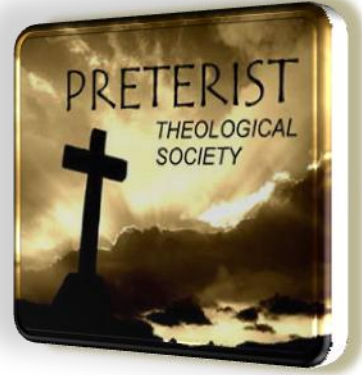


PRETERIST THEOLOGICAL SOCIETY

Membership Application Form



Complete and return this form with dues enclosed to:

Joseph Vincent
PTS Membership
11418 W. 73rd Street
Shawnee, KS 66203

All dues should be made by money order or check, payable to the "Preterist Theological Society"

Name

Employer

Address

City

State/Province

Zip Code

Email Address #1

Email Address #2

Post-High School Education (Beginning with current or most recently completed program)

School

Degree Earned

Date Earned

Other Memberships in religious or professional societies

Books or Scholarly Articles Recently Published

Major Research Started or In Progress

Specific Fields of Special Theological or Research Interest

Doctrinal Statement: Do you agree with the Doctrinal Statement presented on behalf of the Preterist Theological Society? *(Not required for associate member applicants)*

YES []

NO []

If you were referred by a current full member or board officer please specify who referred you here

Membership Requested

- New Application Full Membership
- New Application Associate Membership
- Membership Renewal

Membership Dues (payment enclosed)

- Full Member - \$25
- Associate Member - \$25
- Student Member - \$15
- Retired Member - \$15 (over age 65)
- Institution or Organization Member - \$25

Membership Agreement

I, _____, agree to uphold and abide by the requirements set forth

NAME

within the Bylaws and Code of Ethics as a member of the Preterist Theological Society.

Member Applicant Signature

Application Date