



THE PARISH OF HARBOUR CHURCH PORTSMOUTH ADULT BAPTISM APPLICATION FORM

Please confirm which of the following criteria applies to you:

I have regularly been attending Harbour Church for at least six months

I have completed the Alpha Course at Harbour Church

Service Date: _____

Full Name: _____

Date of Birth: _____

Address: _____

Telephone Number: _____

E-mail address: _____

Signed _____ Date _____

Please return this form to a member of clergy or send it to us at
hello@harbourchurchuk.org