

## XYZ Registration Form

**XYZ Membership Number:**

021214085728

**XYZ Group**

Daraius' Daredevils

**Name**

Persheus Vasania

**Date of Birth**

25/03/2005

**Age**

09

**Address**

A-602, Dwarka-CHS, Sector-14, Koparkhairane  
Navi Mumbai 400709  
India

**Residence Tel. No - Area Code**

022

**Residence Tel. No - Landline Number**

27551693

**Gender**

Male

**Your relation with the participant**

Father

**Contact Name**

Viraf Vasania

**Contact Number**

9967013535

**Contact Email**

[virafsv@yahoo.com](mailto:virafsv@yahoo.com)

**Would you like to be an XYZ Volunteer?**

No

**School Name**

St. Mary's ICSE School

**Standard**

4th

**Navjote Performed**

Yes

**Are you Navar/Martab:**

None

**Blood Group**

A +ve

**T-Shirt Size**

28

**Food Preference**

Non Vegetarian

**Food Allergies, if any**

No

**Mother's Name**

Shernaz Viraf Vasania

**Mother's Phone**

9967013533

**Mother's Email**[svasania@yahoo.co.in](mailto:svasania@yahoo.co.in)**Occupation**

Service

**Name of Organisation**

Johnson Controls

**Position Held**

HR Manager

**Father's Name**

Viraf Sam Vasania

**Father's Phone**

9967013535

**Father's Email**[virafsv@yahoo.com](mailto:virafsv@yahoo.com)**Occupation**

Service

**Name of Organisation**

Reliance Life Sciences Pvt Ltd

**Position Held**

Research Leader

**Guardian's Name**

Shehnaz Kairas Vakharia

**Guardian's Phone**

9821543016