

## XYZ Registration Form

**XYZ Membership Number:**

051214044654

**XYZ Group**

Cyrus' Superstars

**Name**

shayan daruwalla

**Date of Birth**

24/07/2005

**Age**

09

**Address**

T- 28 GODREJ BAUG NAPEANSEA ROAD 3 RD FLOOR  
mumbai 400026  
India

**Residence Tel. No - Area Code**

022

**Residence Tel. No - Landline Number**

23678108

**Gender**

Male

**Your relation with the participant**

Mother

**Contact Name**

ferzana daruwalla

**Contact Number**

9821527520

**Contact Email**

[ferzanasd@yahoo.co.in](mailto:ferzanasd@yahoo.co.in)

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

Yes

**School Name**

campion chool

**Standard**

4th

**Navjote Performed**

Yes

**Are you Navar/Martab:**

None

**Blood Group**

O +ve

**T-Shirt Size**

28

**Food Preference**

Non Vegetarian

**Food Allergies, if any**

No

**Mother's Name**

ferzana daruwalla

**Mother's Phone**

9821527520

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

Homemaker

**Father's Name**

sarosh daruwalla

**Father's Phone**

9819652819

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

Service

**Name of Organisation**

celebrity cruises

**Position Held**

restaurant manager