

## XYZ Registration Form

**XYZ Membership Number:**

221114120707

**XYZ Group**

Daraius' Daredevils

**Name**

Ho Go

**Date of Birth**

07/05/2006

**Age**

11

**Address**

Hajjana  
Kekrne Dmsmsme  
India

**Residence Tel. No - Area Code**

Dmmene

**Residence Tel. No - Landline Number**

Memene

**Gender**

Male

**Your relation with the participant**

Mother

**Contact Name**

Skke Skks

**Contact Number**

9820683398

**Contact Email**

[Hgotla@gmail.com](mailto:Hgotla@gmail.com)

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

Yes

**School Name**

Ndksnd

**Standard**

4th

**Navjote Performed**

No

**Blood Group**

O -ve

**T-Shirt Size**

26

**Food Preference**

Non Vegetarian

**Food Allergies, if any**

No

**Mah**

Fravardin

**Roj**

Hormuzd

**Occupation**

Service

**Occupation**

Service

**Relationship**

Brother

**Relationship**

Sister

**Relationship**

Grand Mother

**Relationship**

Grand Father

**Relationship**

Grand Mother

**Relationship**

Grand Father