

## XYZ Registration Form

**XYZ Membership Number:**

091214120032

**XYZ Group**

Cyrus' Superstars

**Name**

JEHAN MODY

**Date of Birth**

24/01/2001

**Age**

13

**Address**

29 SETHNA BUILDING, 3RD FLOOR, NOWROJI SETH STREET, THAKURDWAR,  
MUMBAI 400002  
India

**Residence Tel. No - Area Code**

022

**Residence Tel. No - Landline Number**

22010572

**Gender**

Male

**Your relation with the participant**

Mother

**Contact Name**

ZINOBIA MODY

**Contact Number**

9821166259

**Contact Email**

[zinobia\\_mody@yahoo.com](mailto:zinobia_mody@yahoo.com)

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

No

**School Name**

CAMPION SCHOOL

**Standard**

8th

**Navjote Performed**

Yes

**Are you Navar/Martab:**

None

**Blood Group**

B +ve

**T-Shirt Size**

34

**Food Preference**

Non Vegetarian

**Food Allergies, if any**

Yes

**Food Allergies**

SEAFOOD

**Mother's Name**

ZINOBIA MANECK MODY

**Mother's Phone**

9821166259

**Mother's Email**[zinobia\\_mody@yahoo.com](mailto:zinobia_mody@yahoo.com)**Occupation**

Homemaker

**Father's Name**

MANECK RASTOM MODY

**Occupation**

Service