

## XYZ Registration Form

**XYZ Membership Number:**

131214072527

**XYZ Group**

Cyrus' Superstars

**Name**

ZENIA PATEL

**Date of Birth**

14/07/2009

**Age**

05

**Address**

7/4, ABOVE ZORASTRIAN BANK, GAMADIA COLONY  
MUMBAI 400007  
India

**Residence Tel. No - Area Code**

022

**Residence Tel. No - Landline Number**

23532890

**Gender**

Female

**Your relation with the participant**

Mother

**Contact Name**

HAVOVI PATEL

**Contact Number**

98198157

**Contact Email**

[HOMHAVZI@GMAIL.COM](mailto:HOMHAVZI@GMAIL.COM)

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

No

**School Name**

WALSINHAM GIRLS HIGH SCHOOL

**Standard**

Primary

**Navjote Performed**

No

**Blood Group**

A +ve

**T-Shirt Size**

26

**Food Preference**

Non Vegetarian

**Food Allergies, if any**

No

**Mother's Name**

HAVOVI PATEL

**Mother's Phone**

9819898157

**Mother's Email**

[HOMHAVZI@GMAIL.COM](mailto:HOMHAVZI@GMAIL.COM)

**Occupation**

Homemaker

**Father's Name**

HORMAZ PATEL

**Father's Phone**

9819898157

**Father's Email**

[HOMHAVZI@GMAIL.COM](mailto:HOMHAVZI@GMAIL.COM)

**Occupation**

Service

**Name of Organisation**

MERCHANTILE MARINE

**Position Held**

CHIEF OFFICER

**Guardian's Name**

DILKHUSH READYMONEY

**Guardian's Email**

[DILKHUSHREADYMONEY@GMAIL.COM](mailto:DILKHUSHREADYMONEY@GMAIL.COM)

**Guardian's Phone**

9820880219