

## XYZ Registration Form

**XYZ Membership Number:**

270115101739

**XYZ Group**

Homai's Heroes

**Name**

parinaz sanjana

**Date of Birth**

13/01/2004

**Age**

11

**Address**

123 Wellington house flat no 7Dr B Ambedkar Rd. parel  
mumbai 400012  
India

**Residence Tel. No - Area Code**

02224105506

**Residence Tel. No - Landline Number**

02224105506

**Gender**

Female

**Your relation with the participant**

Mother

**Contact Name**

diana sanjana

**Contact Number**

9870507634

**Contact Email**

[homyar.sanjana@tcs.co](mailto:homyar.sanjana@tcs.co)

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

No

**School Name**

Jb vachha high school

**Standard**

5th

**Navjote Performed**

Yes

**Are you Navar/Martab:**

None

**Blood Group**

O +ve

**T-Shirt Size**

26

**Food Preference**

Non Vegetarian

**Food Allergies, if any**

No

**Mother's Name**

Diana

**Mother's Phone**

9870507634

**Mother's Email**

[diana.sanjana@gmail.com](mailto:diana.sanjana@gmail.com)

**Occupation**

Service

**Name of Organisation**

jb vachha high school

**Position Held**

teacher

**Father's Name**

homyar sanjanaho

**Father's Phone**

9821583105

**Father's Email**

[homyar.sanjana@tcs.com](mailto:homyar.sanjana@tcs.com)

**Occupation**

Service

**Name of Organisation**

tcs

**Position Held**

sr manager

**Guardian's Name**

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**Guardian's Email**

[diana.sanjana@gmail.com](mailto:diana.sanjana@gmail.com)

**Guardian's Phone**

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