

## XYZ Registration Form

**XYZ Membership Number:**

071214115032

**XYZ Group**

Daraius' Daredevils

**Name**

Afrin Mistry

**Date of Birth**

28/07/2005

**Age**

09

**Address**

599/5 sharma nivas jame jamshed road , matunga , mumbai -19  
Mumbai 400019  
India

**Residence Tel. No - Area Code**

9822291743

**Residence Tel. No - Landline Number**

02224121434

**Gender**

Female

**Your relation with the participant**

Mother

**Contact Name**

Pearl Mistry

**Contact Number**

9822291743

**Contact Email**

[pearlmistry3jp@gmail.com](mailto:pearlmistry3jp@gmail.com)

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

Yes

**School Name**

Jb vachha

**Standard**

4th

**Navjote Performed**

Yes

**Are you Navar/Martab:**

Navar

**Blood Group**

O +ve

**T-Shirt Size**

26

**Food Preference**

Non Vegetarian

**Food Allergies, if any**

No

**Mother's Name**

Pearl Mistry

**Mother's Phone**

809

**Occupation**

Service

**Occupation**

Service