

## XYZ Registration Form

**XYZ Membership Number:**

091214114825

**XYZ Group**

Homai's Heroes

**Name**

Syona Parmar

**Date of Birth**

28/11/2006

**Age**

08

**Address**

18-B, Kalpataru Habitat, Dr S S Rao Road, Parel  
Mumbai 400012  
India

**Residence Tel. No - Area Code**

022

**Residence Tel. No - Landline Number**

24112091

**Gender**

Female

**Your relation with the participant**

Mother

**Contact Name**

Parizad Parmar

**Contact Number**

9820464574

**Contact Email**

[parizadparmar@yahoo.in](mailto:parizadparmar@yahoo.in)

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

No

**School Name**

J B Petit High School

**Standard**

2nd

**Navjote Performed**

No

**Blood Group**

B -ve

**T-Shirt Size**

28

**Food Preference**

Non Vegetarian

**Food Allergies, if any**

No

**Mother's Name**

Parizad Parmar

**Mother's Phone**

9820464574

**Mother's Email**

[parizadparmar@yahoo.in](mailto:parizadparmar@yahoo.in)

**Occupation**

Homemaker

**Father's Name**

Nilesh Parmar

**Father's Phone**

9820220455

**Father's Email**

[nileshparma@yahoo.co.uk](mailto:nileshparma@yahoo.co.uk)

**Occupation**

Service

**Name of Organisation**

Edelweiss Tokio Life Insurance

**Position Held**

COO