

## XYZ Registration Form

**XYZ Membership Number:**

181214122432

**XYZ Group**

Cyrus' Superstars

**Name**

Tiana Patel

**Date of Birth**

03/03/2007

**Age**

07

**Address**

Baria Bldg No. 1, Flat No. 10, 2nd Floor, Gamadia Colony, Tardeo  
Mumbai 400007  
India

**Residence Tel. No - Area Code**

02223516734

**Residence Tel. No - Landline Number**

02223516734

**Gender**

Female

**Your relation with the participant**

Mother

**Contact Name**

Farzana Patel

**Contact Number**

9869483274

**Contact Email**

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

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

No

**School Name**

St. Annes High School

**Standard**

2nd

**Navjote Performed**

Yes

**Are you Navar/Martab:**

None

**Blood Group**

B +ve

**T-Shirt Size**

28

**Food Preference**

Non Vegetarian

**Food Allergies, if any**

Yes

**Food Allergies**

Chocolate, Corn, Nuts, etc

**Mother's Name**

Farzana Patel

**Mother's Phone**

9869483274

**Mother's Email**

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

**Occupation**

Business

**Name of Organisation**

AFT Digital

**Position Held**

Proprietor

**Father's Name**

Arish Patel

**Father's Phone**

9821483274

**Father's Email**

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

**Occupation**

Business

**Name of Organisation**

AFT Digital

**Position Held**

Proprietor

**Guardian's Name**

Jimmy Patel

**Guardian's Email**

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

**Guardian's Phone**

9821176181