

## XYZ Registration Form

**XYZ Membership Number:**

140115095843

**XYZ Group**

Cyrus' Superstars

**Name**

Karyna Hakim

**Date of Birth**

16/06/2007

**Age**

07

**Address**

Khareghat Colony, Building no 11, Flat no 1, Hughes Road  
Mumbai 400007  
India

**Residence Tel. No - Area Code**

022

**Residence Tel. No - Landline Number**

23620220

**Gender**

Female

**Your relation with the participant**

Mother

**Contact Name**

Anahita Hakim

**Contact Number**

9819785630

**Contact Email**

[anahitahakim6@gmail.com](mailto:anahitahakim6@gmail.com)

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

No

**School Name**

Activity School

**Standard**

2nd

**Navjote Performed**

No

**Blood Group**

O +ve

**T-Shirt Size**

26

**Food Preference**

Non Vegetarian

**Food Allergies, if any**

No

**Mother's Name**

Anahita Hakim

**Mother's Phone**

9819785630

**Mother's Email**

[anahitahakim6@gmail.com](mailto:anahitahakim6@gmail.com)

**Occupation**

Service

**Father's Name**

Porus Hakim

**Father's Phone**

9819613579

**Occupation**

Service