

## XYZ Registration Form

**XYZ Membership Number:**

281114121807

**XYZ Group**

Tehmurasp's Titans

**Name**

Twisha Talati

**Date of Birth**

19/02/2006

**Age**

08

**Address**

D-2/ 24, Bharucha Baug, SV Raod  
Mumbai 400058  
India

**Residence Tel. No - Area Code**

-

**Residence Tel. No - Landline Number**

-

**Gender**

Female

**Your relation with the participant**

Mother

**Contact Name**

Dinaz Talati

**Contact Number**

9867529496

**Contact Email**

[dinaz.talati@gmail.com](mailto:dinaz.talati@gmail.com)

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

No

**School Name**

Bai Avabai Petit Girls High School

**Standard**

3rd

**Navjote Performed**

Yes

**Are you Navar/Martab:**

None

**Blood Group**

O +ve

**T-Shirt Size**

30

**Food Preference**

Non Vegetarian

**Food Allergies, if any**

No

**Mother's Name**

Dinaz P Talati

**Mother's Phone**

9867529496

**Mother's Email**[dinaz.talati@gmail.com](mailto:dinaz.talati@gmail.com)**Occupation**

Homemaker

**Father's Name**

Percy D Talati

**Father's Phone**

9820189496

**Father's Email**[percy.talati@gmail.com](mailto:percy.talati@gmail.com)**Occupation**

Service

**Name of Organisation**

HSBC

**Position Held**

Sr Vice President

**Guardian's Name**

Gool Jal Gazder

**Guardian's Phone**

9867529494