

## Akhil Bhartiya Shri Visha Nagar Vanik Samaj

## Matrimonial Registration Form

Gender : Male  Female 

Upload your Profile Image (only jpg images upto 1mb)

Choose File No file chosen

Candidate Name

Candidate Gautra

ABHINAY JARIWAN 

Father's Name

Date of Birth :

- Day - - Month - - Year - 

Age : (eg.: 21)

21 

Birth Time : (eg.: 14:20)

08:30 

Birth Place :

Height : (eg. 5.5)

5.5 

Weight : (eg. 54)

50 

Color :

Hobbies :

Education :

DOCTOR 

Stream/subject

Business / Occupation :

Annual Income :

मोबाइल नं. :

Office Address :

Father's Business /  
Occupation :

Father's Annual Income:

Father's Mobile No. :

Mother's Name:

Mother's Business /  
Occupation :

Mother's Mobile :

Residence Address :

Whatsapp No. :

Phone No. :

email :

Manglik := YES  NO Match Kundli := YES  NO 

Submit Form

Technical Contact : Chetan Nagar, +91 98932 46374