

Form No.: _____

Received date : _____

Further Contact No.: _____

Kanara Saraswat Association

Association Building, 13/1-2, Talmakiwadi, J.D. Marg, Mumbai 400 007. Tel.: 2380 2263.

Visiting Hours :
Monday / Wednesday : 5.30 to 7.30 p.m.

Name : _____

Address : _____

Tel. Nos.: _____

Date of Birth : _____

PHOTO

Educational Qualifications : _____

Service / Business in India / Abroad: _____ Monthly Income : _____

Complexion : Very Fair / Fair / Moderately Fair / Wheatish

Built : Slim / Medium (slimmer) / (fatter) / Well built

Height : _____ Weight : _____ Blood Group : _____

Hobbies : _____ Habits : _____

Family Background : Father _____ Mother (nee name) : _____

Brothers : _____ Sisters : _____ Previous Address : _____

Ref. (1) Name of close relative : _____ Address _____ Tel. _____

(2) Name of close friend : _____ Address _____ Tel. _____

Requirements :

Age Difference : Minimum/Maximum

Working girl : Yes / No

Vegetarian / Non-Vegetarian

Prepared to go out : Yes / No

City :

Country :

Faith in horoscope : Yes / No

Any other Information : _____

Janma Nakshtra :

Nadi : Madhya

Antya

Adya

Rashi :

Janma Lagna

Gana : Dev

Manushya

Rakshas

Dasha balance : _____ Years _____ Months _____ Days

* In the event of you are being engaged, please inform KSA immediately.