

Chh-Gam Patidar Samaj Youth Alliance Form

Serial# _____ (for database)

Date: _____

Is this New listing: _____ Change Request: _____ Correction: _____ (Underline Changes or Corrections)

Name: _____ Sex: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____ Home Phone: _____

E-mail Address: _____

Work Phone: _____ Mobile Phone: _____ Fax Number: _____

Education/Degree: _____ Occupation: _____

Height: _____ Weight: _____ Divorced: _____ If Yes, # of Children? _____

Hobbies: _____

Citizenship: USA _____ Canada _____ UK _____ Tanzania _____ India _____ Other (Specify) _____

Contact Person (If Applicable) _____ Phone# _____

Contact Person's E-mail Address: _____

Father's Full Name: _____ Native Gam: _____

Mother's Full Name: _____ Native Gam: _____

There is \$15.00 fee for this service. You must also complete the Annual Membership form and a \$20.00 Membership fee (The total is \$35.00). All fees must be in US currency only. A list of candidates of opposite sex will be provided after you register. Also periodically additional candidates data may be published in the C.G.P.S newsletter. **Mail the Form to: CGPS: Attn. Sandip Desai, 7 Brotherhood Street, Piscataway, NJ 08854 or call 732-819-7240, if you require further assistance. You can also e-mail us at help@chhgamsamaj.com. An E-mail Address is required if you want the copy of the Profile Listing. Without the E-mail address you will not get the copy of listing.**

Disclaimer: I declare that all information provided here is true and accurate. I also understand that information provided here will be used for Youth Alliance purposes only. I give permission to C.G.P.S. to use above information for matrimonial purposes and publication thereof. When I get married, I will inform C.G.P.S. to remove my name from the database. C.G.P.S. may remove my name after seven years from the listing posted date unless I contact them in writing to keep my information active.

Candidate's Signature: _____ **Date:** _____

Please complete all sections and send at address listed at the top of the form. The candidate **must** sign this form. Incomplete forms **will not** be accepted.

Please visit us on our website at www.chhgamsamaj.com