

Matrimonial Registration Form

Please complete this Form in CAPITAL LETTERS and email it to us at admin@mai-ms.co.uk

Your Details

Name	Surname	Gender (M/F)		
Date of Birth	Ethnicity			
Height	_ftinches	Nationality		
Qualifications				
Employment				
City of Employment	Are you willing to Move			
Present Marital Status		(Single/Divorced/Widow/Widower)		
Veg / Non-Veg	Smoking (Yes/No	o)Alcohol (Yes/No)		
Hobbies		······································		
Contact No (Home)	(Mo	bile)		
Email Address				
Parent's Details				
Contact Details (Name): _		Relation (Father/Mother)		
Contact No (Home)	(Mo	(Mobile)		
Email Address				
Address				
	Post Code	Country		
Preferred Contact (Myself/Parents)				

Desired Life Partner's Details						
Age	to)	years.			
Height:	ft	inches to	ft	inches		
Single/Divorced _						
Country of Birth		_Country of Residence	Nationality_			
Veg / Non-Veg		Smoking (Yes/No)	Alcohol (Yes/No)			
Profession						
Hobbies	 					
Disclaimer						
1. I confirm that the	ne above deta	ails are correct.				
 I understand that Mai Matrimonial Services Limited is only helping me to introduce the potential matches. The company is not involved or responsible for any agreements or engagements after this stage. 						
3. I understand th	at the memb	ership fee once paid is no	n-refundable.			
4. I have paid £200 for subscription fee / £300 for premium membership fee into the company's account and attached a screenshot of the funds transfer. For information on our two services, please visit Join Us page of our website www.mai-ms.co.uk						
Business name Account Number Sort Code: 77-	er: 00192415	IMONIAL SERVICES LIN	MITED			
I consent to Mai Matrimonial Services for storing, processing and distributing the above information to the members of the matrimonial services.						
How did you hear	from us (Ref	Name)				
Signature		Date	9			
Name						