



THE HINDU COUNCIL OF TANZANIA

P O Box 581, Dar Es Salaam, Tanzania

Tel: +255 688 428 428; email: secretary@hinducounciltz.org

www.hinducounciltz.org

Hindu Emergency Response Team SURAKSHA TANZANIA REGISTRATION FORM

First Name:	
Middle Name: <i>[Father's Name]</i>	
Last Name: <i>[Surname]</i>	
Community:	
Date of Birth: <i>[dd.mmm.yyyy]</i>	GENDER: <input type="checkbox"/> M <input type="checkbox"/> F
Cell Number 1: <i>[Primary]</i>	
Cell Number 2:	
Cell Number 3:	
Email:	
Email 2:	
Residential Address: <i>[Street]</i>	
<i>[Area]</i>	
Place of work / Study:	