



MonoMazi

Alone Together

Member Registration Form

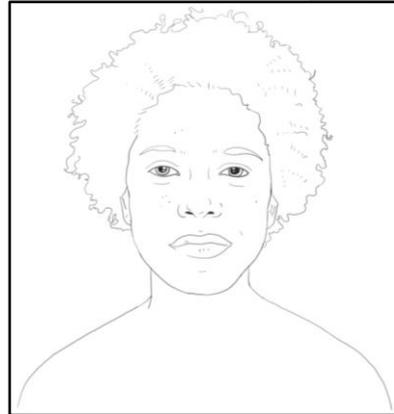
IMPORTANT:

- Please read the additional 'Instructions to New Members' carefully before completing this form.
- Please complete all sections in BLACK or BLUE.
- All information provided in this form will be used by MonoMazi Inc. (MMI) for member registration, statistical research and analysis, and for keeping its members informed of its services. In addition, MMI may use the collected data for the improvement of its services and financial improvements. The personal data by means of this form is voluntary. However, insufficient information may result in rejection of an application.

(For office use only)

MMI Member No. 181244

PERSONAL DETAILS



Gender: M / F / O

Surname: Byrne

Forename: Kala

Identity Card No.: PS8C9IX92

Date of birth: 07-12-1988
(mm/dd/yyyy)

Place of birth: Wingate

Tel. No.: 5033357108

Email address: KalaByrne@hmail.com

Residential address: 3677 Jefferson Street