

Contributor Information

Please fill out these details to enable me to acknowledge your efforts

Name	<input type="text"/>	Phone Number	<input type="text"/>
Address	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>
		Zip Code	<input type="text"/>
Country	<input type="text"/>		
		email	<input type="text"/>
		Other contact	<input type="text"/>

Indian State and region you

Your Mother tongue:

Age: (my oldest contributor is 94)

Your religious affiliation (Mutt /

The Panchaanga you use:

Name of your community:

Name of your sect:

12. Any other

Your profession:

Your interests (are you an

Your queries

16. Other information