| **S.No** | **CHEST**  **NO.** | **NAME** | **Date of Birth** | **Mobile No.** | **Mail id** | **Blood Group** | **Emergency contact** | **Address** | **AGE GROUP** | **Event 1** | **Event 2** | **Event 3** | **PHOTO** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| {{%tr for item in total %}} |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | {{item[0]}} | {{item[1]}} | {{item[2]}} | {{item[3]}} | {{item[4]}} | {{item[5]}} | {{item[6]}} | {{item[7]}} | {{item[8]}} | {{item[9]}} | {{item[10]}} | {{item[11]}} |  |
| {{%tr endfor %}} |  |  |  |  |  |  |  |  |  |  |  |  |  |