MemberNo.				
First Name	Middlename	Middlename surname		
Username				
Password				
Relation	Dropdown List	Dropdown List		
Email				
Date of Birth	Age	Auto		
Birth Place				
Native				
Gotra	Drop down	Drop down		
Education				
Blood Group				
Profession	Drop down	Drop down		
Profession Detail	Multi Line	Multi Line		
Telephone no				
CellNo.				
Photo	Upload			
UploadPdf	Upload			
Address	Multiline box			
Gender	Drop down			
Marital status	Drop down			
Coutry	Drop down			
State	Drop down			
City	Drop down			
Area	Drop down			
Relative MemberNo				

Add Family Detail Add Remove

Name				
Relation	Drop dowr	Drop down		
Education				
City	Drop dowr	Drop down		
Blood Group				
Date of Birth		Age	Auto	
Birth Place			·	
Gender				
Marital Status				
Profession	Drop dowr	1		
Profession Detail	Multi Line			
Image	Upload			