

## Sri Agasthya Maha Siva Naadi Astrological centre - Questionnaire form for online reading

<p><b>Head office address</b></p> <p>No. 34 A/1, Salai Street, (Near Ekambaranadhar temple) Diagonally opp. to Bharat Petroleum, Big Kancheepuram – 2 Tamil Nadu. India</p>	<p><b>Branch office address</b></p> <p>No. 2, 12th Cross street, Rengasamudram. Sathyamangalam - 2. Tamil Nadu India</p>
<p><b>Phone</b> = 044 – 27222135 <b>Mobile numbers (with WhatsApp)</b> = 93454 35024 and 96599 58135</p>	

S. No.	Questions	Answers
1	Your name	
2	Country, state and city / town	
3	Mobile number	
4	Email address	
5	Date of birth	
6	Place of birth (Country, state, place format)	
7	Birth date and time	
8	Birth star	
9	Rasi (Moon sign)	
10	Mother's name	
	a) Is she alive now?	
	b) If Yes to above question, how old is she now?	
	c) If No to above question, at what age she died and how? Provide short description.	

11	Father's name	
	a) Is he alive now?	
	b) If Yes to above question, how old is he now?	
	c) If No to above question, at what age he died and how? Provide short description.	
12	Are you among twins? (Yes / No)	
13	Are you handicapped (Yes / No)	
	a) If yes, is it from birth or later. Provide short description.	
14	Did you met with any accidents (Yes / No)	
	a) If yes, At what age it happened?	
	b) If yes, how it affected you?	
	c) If yes, did you undergo any operation / medication? Provide short description.	
15	Number of Siblings (alive)	
	a) How many elder brothers?	
	b) How many younger brothers?	
	c) How many elder sisters?	
	d) How many younger sisters?	
	e) If any of the siblings died, provide information on how many died, who are they and at what age? Provide short description.	
	f) Your rank among siblings	
16	Married and unmarried details of brothers and sisters (including divorce if any) :	
	Provide short description	

17	Are you living with your siblings?	
18	Maintaining good relation with Siblings? (Yes/ No)	
19	Your educational qualification	
20	Your employment details	
21	Are you married (Yes / No)?	
	If yes, provide the following details	
	a) Your spouse name	
	b) Your spouse's educational qualification	
	c) Is your spouse's employed (Yes / No)	
	d) If yes, provide details regarding nature of job	
	e) Is your marriage is love marriage or arranged marriage?	
	f) Are you living with your spouse or living separately?	
	g) Did your spouse met with any accidents? If yes, provide short description.	
	h) Is your spouse physically handicapped (Yes / No)	
	i) Is your spouse suffering from any major ailments / diseases for prolonged time? If yes, provide details.	
22	Are you divorcee (Yes / No)?	
	If yes, provide the following details	
	a) At what age, you got divorced?	
	b) Are you remarried? (Yes / No)	
	c) If answer to above question is yes, then at what age, you got remarried?	
	d) Are the details provided in question no. 21 are relevant to current context? (Yes/No)	

