

Gallery Judaica

www.galleryjudaica.com

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310-475-1242 (phone) ▪ 888-311-3636 (toll-free) ▪ 310-475-3881 (fax)
info@galleryjudaica.com

Ketubah Worksheet Information

PLEASE READ

**** Please purchase your ketubah on our website before you send us your worksheet ****

The Worksheet requires your names, your parents' names, and the date and location of the wedding (i.e. city) -- in Hebrew and English. Some additional information is required for Orthodox and Conservative ketubot.

If you are not able to provide us with Hebrew names, we will "transliterate" the English names you provide into Hebrew. This means that the English names will be spelled out in Hebrew letters. If you would like us to transliterate a name, please fill out the name in the English section, and check the box marked "TRANSLITERATE."

Print the worksheet and fill it out **neatly in print in black ink** with the required information, then sign the Worksheet and either **fax** or **scan and email** it to us. **Please call us to confirm that we received the worksheet.**

We strongly suggest you work with a rabbi when completing the Worksheet. Your ketubah will be filled in exactly as indicated on your signed Worksheet. Gallery Judaica will not personalize your ketubah without your signature -- and preferably your rabbi's.

YOUR WORKSHEET MUST BE COMPLETE WHEN YOU SEND IT TO US, AS GALLERY JUDAICA CANNOT BE RESPONSIBLE FOR COMMUNICATING WITH YOUR RABBI.

PLEASE NOTE: Transliteration is IMPERFECT. If you ask us to transliterate a name, the Hebrew spelling will be at the discretion of Gallery Judaica. By asking us to transliterate, you are agreeing to accept our Hebrew spelling.

Please allow 4 to 6 weeks for delivery of your ketubah.

Gallery Judaica would like to wish you a hearty "Mazal Tov" -- "Congratulations" -- on your upcoming joyous occasion!

- PROCEED TO NEXT PAGE -

ONLINE PURCHASE - KETUBAH WORKSHEET FOR GALLERY JUDAICA

Phone: 310-475-1242 / 888-311-3636 • Fax: 310-475-3881 • Email: info@galleryjudaica.com • Website: www.galleryjudaica.com

Wedding Date: _____ / _____ / _____
Name: Groom / Bride: _____ **Groom / Bride:** _____
Primary Phone: () _____ -- _____ Groom / Bride (circle one) **Alternate Phone:** () _____ -- _____ **G / B**
Fax Number: () _____ -- _____ **G / B**
Email: _____

<p><u>DIRECTIONS:</u></p> <ul style="list-style-type: none"> Have your rabbi, cantor or wedding officiant approve the Ketubah text. Please type or print all information clearly in capital letters in black ink, exactly as it is to appear on the Ketubah. Have your rabbi review the worksheet and fill in any missing information. Review and approve this worksheet by signing at the bottom of this form. 	<p><u>SHIPPING ADDRESS:</u></p> <p>_____</p> <p>_____</p> <p>_____</p>
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**** You can check off "Transliterate" for any Hebrew information. By doing so, you are agreeing to accept Gallery Judaica's Hebrew spelling ****

Ketubah Name: _____ **Artist:** _____ **Text:** _____
1) Secular Wedding Date: _____ **Time (circle one):** Before sunset After sunset
2) Day of Hebrew Month: _____ **Hebrew Month:** _____ **Hebrew Year:** _____
3) Place of Marriage - ENGLISH: City: _____ State: _____
4) Place of Marriage - HEBREW: City/State: _____ Transliterate

ENGLISH <small>(PLEASE PRINT)</small>		HEBREW <small>(PLEASE PRINT)</small>
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	Groom's Full Name	<input type="checkbox"/> Transliterate
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Leave Blank	Groom's Father <input type="checkbox"/> Cohen <input type="checkbox"/> Levi <input type="checkbox"/> Deceased	<input type="checkbox"/> Transliterate
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Leave Blank	Groom's Mother <input type="checkbox"/> Deceased	<input type="checkbox"/> Transliterate
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	Bride's Full Name	<input type="checkbox"/> Transliterate
--	--------------------------	--

Leave Blank	Bride's Father <input type="checkbox"/> Cohen <input type="checkbox"/> Levi <input type="checkbox"/> Deceased	<input type="checkbox"/> Transliterate
--------------------	--	--

Leave Blank	Bride's Mother <input type="checkbox"/> Deceased	<input type="checkbox"/> Transliterate
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****For Orthodox and Conservative texts only - Bride's Marital Status:** 1st Marriage Divorced Widow Convert Other _____

Let us know if you have a unique request: _____

❖❖ **The bride or groom must review and approve this worksheet by signing below, thereby accepting responsibility for the accuracy of this information.** ❖❖

BRIDE / GROOM: _____ **DATE:** _____