

Archie Granot Papercuts & Ketubahs

Ketubah Fill-in Form

Please complete and e-mail to: papercut@archiegranot.com

Ketubah Name: _____

Text: Orthodox____ Conservative____ Egalitarian____ Anniversary____

Ordered by Store/Gallery/Privatey_____

Date needed: _____

Customer Name(s)_____

Telephone: _____ e-mail: _____

Ship To:

Name _____

Address _____

Address 2 _____

City_____ State: _____

Country: _____

Please ask your Rabbi or officiant to fill in the appropriate information in the Orthodox / Conservative / Egalitarian Ketubah text

Rabbi or Officiant:

Telephone: _____ e-mail: _____

Wedding takes place on:

Sunday ____ Monday ____ Tuesday ____ Wednesday ____ Thursday ____ Friday ____

Saturday ____

Ceremony to take place: Before / After Sundown

Wedding Date:

English _____

Hebrew _____

City and State where Ceremony will take place (indicate country if not USA)

English _____

Hebrew _____

Groom's Name (first, middle, family)

English _____

Groom's Parents' First Name(s): English

Mother _____ Deceased: Yes / No

Father _____ Deceased: Yes / No

Groom's Name (including Father and Mother):

Hebrew _____

Groom's Father is a: Cohen ____ Levi ____ Israelite ____

Bride's Name (first, middle, family)

English _____

Bride's Parents' First Name(s): English

Mother _____ Deceased: Yes / No

Father _____ Deceased: Yes / No

Bride's Name (including Father and Mother):

Hebrew _____

Bride's Marital Status:

Marrying for first time ____ Divorced ____ Widowed ____

Convert ____ Other ____

Bride's Father is a: Cohen ____ Levi ____ Israelite ____

Signature of Rabbi or Officiant _____