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## KETUBAH INFORMATION FORM

**Name:**  
**Email:**  
**Phone number:**

**Ketubah text style:** (i.e. Brit Ahuvim, Own wording, other)

**Ketubah design name:**

**English Wedding date:** (Day of the week, Day of the month, Month, Year)

**Hebrew Wedding date:** (Day of the week, Day of Hebrew month, Hebrew month, Hebrew year)

**Wedding place:** (City, Full State name, Country)

**Partner:**

Partner's Hebrew name:

Partner's English full name:

Mother's Hebrew name:

Mother's English full name:

Father's Hebrew name:

Father's English full name:

**Partner:**

Partner's Hebrew name:

Partner's English full name:

Mother's Hebrew name:

Mother's English full name:

Father's Hebrew name:

Father's English full name:

**Signatures:**

Number of witnesses?

Partners: Leave space for partners to sign?

Rabbi: Leave space for Rabbi / Wedding officiate to sign?

**Fonts:**

Hebrew:

English:

**Comments:**