BETH EL TEMPLE 2626 Albany Avenue West Hartford, CT 06117

SIMCHA FORM - WEDDING

If you will be having any type of reception at Beth El Temple in conjunction with your wedding, please fill out the information below IN FULL and return it to the Temple Office at least two (2) months prior to your wedding. If you have any questions, please call the Temple office at 233-9696.

| NameAddress | | Phone# | |
|---------------------------------|------------------------------|------------------------|---------|
| | | E-Mail# Invited Guests | |
| | | | |
| | Name of Company | Phone# | Contact |
| Caterer | | | |
| Band/DJ | | | |
| Sanctuary Music | | | |
| Florist | | | |
| Photographer | | | |
| Videographer | | | |
| Party Planner | | | |
| Balloons | | | |
| Decorator | | | |
| Will you be supplying? | Time of Do | eliveries | |
| Chuppah | Liq | uor | |
| Kiddush Cups | Flo | wers | |
| Glass for breaking | Bar | ndMisc | · |
| Katubah signingB | sedechenTish | Yichud | |
| (All Ketubahs should be cleared | by the Rabbi for appropriate | eness and accuracy) | |
| Have we received the set up | for the cocktail party an | d/or the reception? | |
| Anything else the Temple sh | ould be aware of? | | |

Mazel Tov

BETH EL TEMPLE OF WEST HARTFORD 2626 Albany Avenue West Hartford, Connecticut 06117

WEDDING INFORMATION

| (Please complete and sign one copy of this form and re | eturn to Temple Office). | |
|--|--|--|
| Wedding Date and Time: | | |
| Bride to be: | | |
| Groom to be: | | |
| They will happily welcome any colleague desired personal honorarium to the Rabbi(s) and canton | Il officiate at all weddings scheduled in our synagogue. by the bride and groom to co-officiate. In lieu of a r, we do ask that you contribute to their respective are \$400 for the Rabbi's Discretionary Fund, and \$300 | |
| | or Rabbi Garber two months prior to the wedding to ain the following information before your meeting with | |
| GROOM | BRIDE | |
| English name(s): | English name(s): | |
| Hebrew name(s) English Lettering: | Hebrew name(s) English Lettering: | |
| Date of Birth: | Date of Birth: | |
| Place of Birth: | Place of Birth: | |
| Home Address: | Home Address: | |
| Occupation: | Occupation: | |
| Groom's descent: (circle one): Kohen, Levi or Israel | Bride's descent: (circle one): Kohen, Levi or Israel | |
| Father's English name(s) | Father's English name(s) | |
| Living or Deceased (circle one) | Living or Deceased (circle one) | |
| Father's Hebrew name(s): English Lettering | Father's Hebrew name(s): English Lettering | |
| Mother's English name(s) | Mother's English name(s) | |
| Living or Deceased (circle one) | Living or Deceased (circle one) | |
| Mother's Hebrew name(s): English Lettering | Mother's Hebrew name(s): English Lettering | |
| It is most important that you call the Temple office @ 233 wedding invitations. | 3-9696 to reconfirm the date and time before ordering your | |
| Our Temple does not permit a cocktail hour prior to the we | dding ceremony. | |
| We have noted the above Signature of Bride & Groom Date | | |