



בס"ד

**SPANISH & PORTUGUESE SYNAGOGUE, HOLLAND PARK**  
8 St James's Gardens, Holland Park, London W11 4RB

*WEDDING APPLICATION*

*PRIVATE & CONFIDENTIAL*

*PLEASE COMPLETE IN BLOCK CAPITALS ALL QUESTIONS AS APPROPRIATE*

**BRIDEGROOM**

1. Name in full (Surname first ) \_\_\_\_\_
2. Hebrew name \_\_\_\_\_ Father's name \_\_\_\_\_
3. Father's Hebrew name \_\_\_\_\_ Is father living? \_\_\_\_\_
4. Cohen/Levy/Israel \_\_\_\_\_
5. Full address \_\_\_\_\_  
\_\_\_\_\_ Post code \_\_\_\_\_
6. Telephone No: Home \_\_\_\_\_ Office \_\_\_\_\_  
Mobile \_\_\_\_\_ Email \_\_\_\_\_
7. Occupation of Father (if retired or deceased please give former occupation)  
\_\_\_\_\_
8. Name of Mother \_\_\_\_\_ Is Mother living? \_\_\_\_\_
9. Name of Synagogue where parents married and date of marriage  
(Please provide sight of original Ketubah for verification)  
\_\_\_\_\_
10. Date of Birth (please provide sight of original birth certificate for  
verification)  
\_\_\_\_\_
11. Place and country of birth \_\_\_\_\_

T: 020 7603 7961/3232 F: 020 7603 9471 E: [admin@hollandparksynagogue.com](mailto:admin@hollandparksynagogue.com)

Charity Registered No: 248945



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12. Have you married before? \_\_\_\_\_ Present status and in case of previous marriage please give name and address of Synagogue and date of marriage

\_\_\_\_\_

In case of divorced applicant please give name and address of Beth Din and date of Get \_\_\_\_\_

13. In case of converted applicant please give name and address of Beth Din and date of conversion \_\_\_\_\_

14. Please provide a current photo with the application.

Signature \_\_\_\_\_

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**BRIDE**

1. Name in full (Surname first ) \_\_\_\_\_
2. Hebrew name \_\_\_\_\_ Father's name \_\_\_\_\_
3. Father's Hebrew name \_\_\_\_\_ Is father living? \_\_\_\_\_
4. Cohen/Levy/Israel \_\_\_\_\_
5. Full address \_\_\_\_\_  
\_\_\_\_\_ Post code \_\_\_\_\_
6. Telephone No: Home \_\_\_\_\_ Office \_\_\_\_\_  
Email address \_\_\_\_\_
6. Occupation of Father (if retired or deceased please give former occupation)  
\_\_\_\_\_
8. Name of Mother \_\_\_\_\_ Is Mother living? \_\_\_\_\_
9. Name of Synagogue where parents married and date of marriage  
(Please provide sight of original Ketubah for verification)  
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14. Please provide a current photo with the application.

**General**

1. Are the Bride and Groom related? \_\_\_\_\_

2. If so what relationship? \_\_\_\_\_

3. What will your address be after marriage \_\_\_\_\_

\_\_\_\_\_

4. Date, time and place of wedding \_\_\_\_\_

\_\_\_\_\_

5. Will you be having a choir at the wedding? \_\_\_\_\_

Signature \_\_\_\_\_