



Consent of Terms and Instructions

Mazel Tov on your engagement. May you be zoche to build a Bayis Ne'eman B'Yisroel!

We are happy to assist you in this time of Simcha. Please read and sign this consent and return it along with the filled out application. Most of the terms mentioned below are Halachic requirements. Nonetheless, we mandate that they be signed on this form to avoid any possible misunderstanding or loss to the organization.

Chasdei Chashie L'Kallah provides beds and in some cases dinette sets. Please be aware that the dinette set are under stricter guidelines.

- The beds are to be used only by the Chosson and Kallah for the **master bedroom**. They are not to be used as an extra set in a second bedroom. Chasdei Chashie offers beds in 48 or 39 inch widths.
- The Dinette sets include a beautiful table with six chairs, and are meant to be used as the main set for the couple (those purchasing/receiving a dining room set are not entitled to a dinette set). Choices will be available upon approval.
- Beds are not to be put in storage. If the Chosson & Kallah are moving to Eretz Yisroel or the like, they may not take the furniture, planning to use it at a later date. If the couple moves back within the year they may still be eligible to receive assistance.
- Please be aware that the furniture cannot be upgraded.
- CCL assists when the wedding is in a Takana/Low-End Hall. We are unable to assist those getting married in a high-end hall.
- Be sure to fill out the application completely and clearly. Please realize that it takes us approximately two weeks to verify eligibility. Feel free to check that we received your application. Please provide references and numbers that are accessible. If possible provide more than one number for the reference such as a cell phone number. You will be contacted by email or phone once approved.
- Once you are approved, you will be contacted by the representative handling your order. From that point on, please be in touch only with that representative. Please make sure to send us your address in a timely manner, so that we can make arrangements for delivery.
- There is a minimum \$75 processing fee payable to Chasdei Chashie that must be paid before furniture will be delivered. There is an additional \$50 - \$75 fee for receiving a dinette set.

I understand and accept the above terms:

Signed: _____

I authorize Chasdei Chashie L'Kallah to contact any references to provide pertinent information and verify eligibility:

Signed: _____

All information will be kept strictly confidential and will be used for Tzedaka purposes only.



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Please write clearly and fill out form in its entirety.

Today's Date: _____ Wedding Date: ___ / ___ / ___ Wedding Hall _____

Other organizations providing assistance: (ie: TDL/Yad Batya/Chupa) Provide Codes _____

Name of Contact (person who contacted Chasdei Chashie): _____

Address of Contact: _____

Phone#: _____ Relation to Kallah: _____

Email: _____ Who should be contacted upon approval? _____

Full name of Kallah: _____

Name of Kallah's Father: _____ Name of Kallah's Mother: _____

Family Address: _____

Family Phone Number: _____ Email Address: _____

Father's Occupation: _____ Mother's Occupation: _____

Name of Shul: _____ Rov: _____ # _____

References: (Please provide Rabbanim, principals, or community leaders. Include cell phones & include references that are easily reached)

1. _____ # _____

2. _____ # _____

Number of children in Kallah's family: _____ Kallah's place in family: _____ Kallah's Date of Birth: _____

Which high school did the Kallah attend? _____ Seminary? _____

Name/number of Principal of high school and/or seminary _____

Kallah's Occupation: _____ Kallah's Employer: _____

Years at current job: _____ Previous Job (if any) _____

Did Chasdei Chashie assist another sibling in family _____ How long ago? _____

Full name of Chosson: _____ Parents: _____

Chosson's Family address: _____

What will the Chosson do after the chasuna? (If learning, please specify where) _____

Where will the Chosson and Kallah live after Chasuna _____

What other furniture was/will be purchased for the Chosson & Kallah? Include store purchased and the \$ amount paid.

How much was spent on Sheitels? _____

How much spent on Kallah gown? _____

Signature: _____

Signer is signing that all information on this form is truthful and all information is filled out comprehensively.

Upon completion please send the form via-

1) Email: apply@helpakallah.org

OR

2) Fax: 206-424-1373

For any question or to ensure that we received application please call 347-620-4145 or email apply@helpakallah.org