

Rabbinical Council of California

4221 Wilshire Blvd Suite 390 Los Angeles, CA. 90010 Phone (213) 389-3382 Fax (213)234-4558 www.rccvaad.org

INSTRUCTIONS FOR COMPLETING THE APPLICATION

Requirements for a Get: Jewish law usually requires that both the husband and wife consent to issuing a get. A Get cannot be issued until the parties separate and live in different residences. **Separate rooms in the same residence is not sufficient.**

It is <u>not</u> a requirement to complete the civil divorce before performing a Get.

Get Appointments and Cancellation: Get appointments are only available 10 AM and 11:45 AM Wednesday and Thursday. A limited number of Sunday appointments are available on a first come first serve basis. Please allow a total of **two hours** for the Get process.

A cancellation fee of \$150 will be charged for any cancellation without twenty-four hours' notice. If you need to cancel your appointment, it is your responsibility to inform your wife/husband. After you have booked your appointment, a Rabbi may contact you to obtain information for the spelling of your name in the get. **Documentation to submit:** Please provide with this application

- A copy of your Ketuba (religious marriage document). If you do not have a copy of the Ketuba, make sure to enter the name of the synagogue where you were married.
- If a civil divorce has been completed, a photocopy of the **first page** of the decree of divorce (not the terms of settlement).
- If a get has been issued for a previous marriage of either spouse, we must have a copy of the P'tur (Certificate of Divorce).
- We need positive proof that the couple is indeed the husband and wife. Please bring with you an ID plus an official document that has the same last names or a copy of marriage license. Without necessary documentation, the session will not begin.

Costs: A Get costs \$950.00, payable to the Rabbinical Council of California. This includes a non-refundable application fee of \$150. Payment is due in full prior to scheduling the get appointment. Payment can be made by check via mail or via fax/email by credit card. Higher fees apply when the get is sent out of town or other special circumstances. Please contact our office to arrange for payment of this type of Get. Procedure: Writing and completing the Get generally takes about two hours. You may wish to bring a book to read or work to do during the actual writing, which takes about 1 hour. Both husband and wife are expected to attend in person. For special circumstances, please consult with the RCC office.

The actual execution of the Get typically **takes place in a synagogue**, <u>not at our offices</u>. Please dress accordingly. Once an appointment is made, we will advise you as to the exact location.

More information on the get procedure is available on our website at www.rccvaad.org.

Gett Application

Date of Application:	Person Applying for gett: □Husband □Wife
HUSBAND	Wife
Name:	Name:
first middle last	
Address:	Address:
City, State, Zip:	
Cell Phone:	11
Email:	
Date of Birth:	
Date and place of Marriage:	
•	
Rabbi's Affiliation: Orthodox Consei	
Was either party ever married before? ☐Yes	
	es, which party:
	solved?:
Date of last separation?	
Is either spouse remarried at this time? Ye	<u>—</u>
Names and ages of children from this marriag	
Any children under the age of 2: Yes I	NO
Was either party adopted? ☐Yes ☐No	
Were both parties born Jewish? ☐ Yes ☐	No
If not, please explain:	
Were both parties' parents born Jewish? ☐Y	∕es
If not, please explain:	
Present Synagogue affiliation: Husband:	Wife:
Has a civil divorce been Yes sissued?	No Date of divorce:
Appointments are available Tuesday & Thu	ursday starting at 10:00am. Please allow for 2 hours.
Do both parties live in Los Angeles?	□No
If not, can they come to Los Angeles for a Ge	
Do both parties consent to the Yes Get?	□No
Party responsible for the payment of the Get f	fee: Husband Wife

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If paying by check please make out the check to "RCC" and mail to:

The Rabbinical Council of California 4221 Wilshire Blvd. Suite 390 Los Angeles, CA 90010

If paying by credit card (Visa, MasterCard only), please fill out the information below:

CC#	exp:	Security Code:	
Name on Card:			
Name on Card: Billing Address:		Zip code:	

Save Application as PDF

You can send this application by email by clicking the button above to save this form as a pdf. Then attach it in an email addressed to info@RccVaad.org

Print Application

You can send this form in via fax or mail by clicking the button above to print the form and sending it to:

Rabbinical Council of California 4221 Wilshire Blvd. #390

Los Angeles, CA 90010 Beth Din Fax: 213.234.4558