

# Agreement Confirmation

**Doctor's Name & Surname:** Sachin Nathoo

**ID NUMBER:** 65655533233

**BHF NUMBER:** 12345555

**ADDRESS:** Unit 6 Punters Way

**["hereinafter "the Medical Practitioner"]**

and

**MELOMED HOSPITAL HOLDINGS (PTY) LTD**

(Registration No: 1998/001843/07)

**Signed Date:** 2025-04-19

**Signature:**

