Consent Letter for Medical Treatment

Date: 3 August 2025

To whom it may concern, I, Mrs. Roeurng Thy, am the mother of Ms. Channa That, born on 13 August 2007. I hereby give my full consent to the doctors and medical staff at the hospital to provide medical care and treatment to my daughter, Ms. Channa That.

I have attached a copy of my identification for your reference.

Sincerely,

Signature:

Name: Mrs. Roeurng Thy

ID Number: IDKHM0204301686

Relationship: Mother

Attached: Copy of ID card

