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To whom it may concern,

With provision of the *Children's Act 2010*, circumcision of **under 12 years old** is indicated only for:

- 1) Religious beliefs (including traditional beliefs) of parents/caregiver
- 2) Medical reasons

By giving your signature, you are indicating that you are aware of the Children's Act restrictions and that your son's circumcision is needed for either of the above two reasons.

Child's Name: _____

Parent/Caregiver's Name: _____

Parent/Caregiver's Signature: _____

Date: _____

