

Invitation Letter with Sponsorship Sample for Medical Treatment

This document provides a detailed **invitation letter with sponsorship sample for medical treatment**, designed to facilitate the process of inviting a patient or their companion to receive medical care abroad. It outlines the official invitation, specifies the sponsorship details covering medical expenses, travel, accommodation, and other related costs, ensuring clarity and support for visa applications and hospital admissions. This sample aims to assist individuals and families in preparing a comprehensive, formal invitation that meets legal and medical establishment requirements, promoting smooth access to necessary healthcare services.

Sample Invitation Letter with Sponsorship for Medical Treatment

[Your Full Name]

[Your Address]

[City, State, ZIP Code]

[Country]

[Email Address]

[Phone Number]

[Date]

To:

[Consulate/Embassy Name]

[Address]

[City, Country]

Subject: Invitation Letter with Sponsorship for Medical Treatment â€“ [Patient's Full Name]

Dear Sir/Madam,

I am writing to formally invite **[Patient's Full Name]** (passport number: **[Passport Number]**), residing at **[Patient's Address]**, to **[Country]** for the purpose of medical treatment at **[Hospital/Medical Facility Name]**, **[City]**, **[Country]**. The treatment is scheduled to commence on **[Treatment Start Date]**.

As the sponsor, I undertake full financial responsibility for all expenses incurred during their stay, including:

- Medical treatment costs at **[Hospital/Medical Facility Name]**
- Round-trip travel expenses
- Accommodation and daily living expenses
- Any other related costs during the treatment period

The patient will be accompanied by **[Companion's Name, if applicable]**, for whom I will also provide full sponsorship.

Attached, please find supporting documents, including:

- Copy of my passport and residency permit
- Proof of relationship and financial capability (bank statements, employment letter, etc.)
- Medical appointment confirmation and treatment details from **[Hospital/Medical Facility Name]**
- Any other required supporting documentation

I kindly request the necessary assistance to facilitate the issuance of the visa for the above-mentioned individuals. Please do not hesitate to contact me if you require further information.

Thank you for your attention and kind support.

Sincerely,

[Your Full Name]

[Signature, if sending a hard copy]