

# Application for Waiver of Membership Dues

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Membership Organization Name]

[Organization Address]

[City, State, Zip Code]

Dear [Membership Organization/Committee Name],

I hope this message finds you well. I am writing to formally request a waiver of my membership dues for the [specific period or year]. Due to [brief explanation of your situation, e.g., financial hardship, unemployment, medical issues], I am currently unable to meet my financial obligations.

I have valued my membership and the opportunities it provides, and I would greatly appreciate your consideration of this request. I am committed to [describe any community involvement or contributions, if applicable].

Thank you for your understanding and support. I look forward to your favorable response.

Sincerely,

[Your Name]