

Membership Continuation Notice

Date: [Insert Date]

[Member's Name]

[Member's Address]

[City, State, Zip Code]

Dear [Member's Name],

We are pleased to inform you that your membership with [Association Name] is set to continue. We value your support and commitment to our mission of [briefly state mission or purpose of the association].

Your membership privileges remain in effect until [Insert Expiration Date]. During this time, you will continue to enjoy access to [list benefits or services provided to members].

If you have any questions regarding your membership or would like to update your information, please do not hesitate to contact us at [Insert Contact Information].

Thank you for your ongoing support.

Sincerely,

[Your Name]

[Your Title]

[Association Name]

[Contact Information]