

Cancellation of Membership Notice

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Association Name]

[Association Address]

[City, State, Zip Code]

Dear [Association Name],

I am writing to formally notify you of my intention to cancel my membership with [Association Name], effective immediately as of [Effective Date]. My membership number is [Membership Number].

Please confirm the cancellation of my membership and ensure that no further dues are charged to my account. I appreciate the time I have spent as a member and wish the association continued success.

Thank you for your attention to this matter.

Sincerely,

[Your Name]