

Participation Confirmation

Date: [Insert Date]

Dear [Participant's Name],

We are pleased to confirm your participation in the Association Career Mentorship Program for the year [Insert Year]. Your commitment to professional growth and development is commendable.

The program will commence on [Insert Start Date] and will run until [Insert End Date]. We encourage you to take full advantage of the resources and mentorship opportunities available to you.

If you have any questions or require further information, please do not hesitate to contact us at [Insert Contact Information].

We look forward to your active participation and wish you a rewarding experience!

Sincerely,

[Your Name]

[Your Position]

[Association Name]