

Cancellation Notice

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Address]

Dear [Recipient's Name],

I am writing to officially notify you of the cancellation of my participation in the medical emergency alert program due to unforeseen circumstances related to a medical emergency.

Despite my intent to remain a part of this important program, my current health situation requires immediate attention and prevents me from fulfilling my commitments.

Please consider this letter as formal notice of cancellation, effective immediately. I appreciate your understanding in this matter.

Thank you for your attention to this situation.

Sincerely,

[Your Name]

[Your Address]

[Your Phone Number]

[Your Email Address]