

Participation Confirmation

Date: [Insert Date]

Dear [Recipient Name],

We are pleased to inform you that you have been successfully registered to participate in the Library Censorship Awareness Program organized by [Library/Organization Name]. The program is aimed at raising awareness about censorship issues affecting libraries and the importance of intellectual freedom.

Event Details:

- **Date:** [Insert Event Date]
- **Time:** [Insert Event Time]
- **Location:** [Insert Location]
- **Duration:** [Insert Duration]

We encourage you to engage actively, share your insights, and learn from the discussions with fellow participants and experts in the field. Together, we can work towards promoting and safeguarding our right to access information freely.

If you have any questions, feel free to contact us at [Contact Information].

Thank you for your commitment to protecting intellectual freedom and supporting our libraries.

Sincerely,

[Your Name]

[Your Title]

[Library/Organization Name]