

Membership Cancellation Intent

Your Name: [Your Full Name]

Your Address: [Your Address]

City, State, Zip: [City, State, Zip]

Email: [Your Email]

Phone Number: [Your Phone Number]

Date: [Current Date]

Membership Department

[Organization Name]

[Organization Address]

[City, State, Zip]

Dear [Membership Coordinator's Name],

I am writing to formally express my intent to cancel my membership with [Organization Name], effective immediately. My membership ID is [Your Membership ID].

This decision is due to [brief explanation of reason for cancellation, if desired]. I would appreciate it if you could confirm the cancellation of my membership and inform me of any final steps I need to take.

Thank you for your attention to this matter. I hope to have the opportunity to join again in the future.

Sincerely,

[Your Name]