

# Cancellation Letter for Physical Therapy Session

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Therapy Center Name]

[Therapy Center Address]

[City, State, Zip Code]

Dear [Therapist's Name or Therapy Center],

I am writing to formally cancel my upcoming physical therapy appointment scheduled for [Insert Date] at [Insert Time]. Unfortunately, due to [brief reason for cancellation, e.g., a scheduling conflict, personal reasons], I am unable to attend.

Please let me know if it is possible to reschedule this appointment for a future date. I apologize for any inconvenience this may cause.

Thank you for your understanding.

Sincerely,

[Your Name]