

# Enrollment Request for Anxiety Management Program

Date: [Insert Date]

To: [Program Coordinator's Name]

[Program Name]

[Program Address]

Dear [Program Coordinator's Name],

I am writing to formally request enrollment in the Anxiety Management Program scheduled to begin on [Start Date]. I have been experiencing [briefly describe your symptoms or experiences related to anxiety], and I believe that participating in your program will help me develop effective coping strategies.

I have heard positive feedback about your program and feel that your approach aligns well with my needs. I am eager to learn more about anxiety management techniques and connect with others who are facing similar challenges.

Please let me know the necessary steps to complete my enrollment, as well as any documentation you may require. I am looking forward to your response.

Thank you for considering my request.

Sincerely,

[Your Name]

[Your Contact Information]