

# Membership Cancellation Request

Date: [Insert Date]

To Whom It May Concern,

I hope this message finds you well. I am writing to formally request the cancellation of my membership at [Community Center Name] due to health issues that have unfortunately made it difficult for me to participate in activities.

My membership details are as follows:

- Name: [Your Name]
- Membership ID: [Your Membership ID]
- Membership Type: [Your Membership Type]

I truly value the services and community provided by [Community Center Name], and it is with regret that I must take this step. I would appreciate if you could confirm the cancellation of my membership and any final steps required on my end.

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Contact Information]