

Membership Cancellation Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

Membership Department

[Networking Association Name]

[Association Address]

[City, State, Zip Code]

Dear Membership Coordinator,

I am writing to formally request the cancellation of my membership with [Networking Association Name], effective immediately. My membership ID is [Insert Membership ID].

Due to [brief reason for cancellation, e.g., personal reasons, lack of time], I have decided to discontinue my membership. I would appreciate a confirmation of my membership cancellation at your earliest convenience.

Thank you for your understanding. I have enjoyed being a part of the association and hope to stay connected in the future.

Sincerely,

[Your Name]