Library Membership Cancellation Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Librarian's Name]

[Library Name]

[Library Address]

[City, State, Zip Code]

Dear [Librarian's Name],

I am writing to formally request the cancellation of my library membership with [Library Name]. My membership ID is [Your Membership ID].

Unfortunately, due to [reason for cancellation], I am unable to continue my membership at this time. I kindly ask you to process this cancellation effective immediately.

Please confirm the cancellation of my membership via email or postal mail. Thank you for your assistance.

Sincerely,

[Your Name]