

Confirmation of Accessibility Services

Date: [Insert Date]

[Your Name]

[Your Title]

[Organization/Institution Name]

[Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

Dear [Recipient's Name],

We are pleased to confirm the accessibility services requested for the upcoming [Conference Name] scheduled on [Conference Dates] at [Conference Location].

As part of our commitment to inclusivity, the following accessibility services will be provided:

- [Service 1 - e.g., Sign Language Interpreters]
- [Service 2 - e.g., Wheelchair Accessibility]
- [Service 3 - e.g., Accessible Restrooms]
- [Any other services]

If you have any further needs or questions, please do not hesitate to contact us at [contact information].

Thank you for your attention, and we look forward to seeing you at the conference!

Sincerely,

[Your Name]

[Your Title]

[Organization/Institution Name]