## **Confirmation of Cross-Registration Participation**

Date: [Insert Date]

Dear [Recipient's Name],

We are pleased to confirm your participation in the cross-registration program for the [Insert Course Name/Title] at [Insert Institution Name]. Your registration has been successfully processed and you are now officially enrolled for the upcoming term starting on [Insert Start Date].

Please find the details of your registration below:

Course Title: [Insert Course Title]
Course Code: [Insert Course Code]
Instructor: [Insert Instructor's Name]

• Class Schedule: [Insert Days and Times]

If you have any questions regarding your enrollment or the course, feel free to contact us at [Insert Contact Information]. We look forward to your participation and wish you a productive and enriching experience.

Best regards,

[Your Name][Your Position][Your Institution Name][Your Contact Information]