

Flu Vaccination Clinic Participation Acknowledgment

Date: _____

To Whom It May Concern,

This letter serves to acknowledge that **[Participant's Name]** has participated in the flu vaccination clinic held on **[Date of Clinic]** at **[Location]**.

The flu vaccination is an important step in protecting individual and community health. We commend **[Participant's Name]** for taking this proactive measure.

If you have any questions or require further information, please feel free to contact us at **[Contact Information]**.

Thank you for your participation.

Sincerely,

[Your Name]

[Your Title]

[Organization Name]

[Contact Information]