

[Your Name]
[Your Title]
[Your Organization]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient Name]
[Recipient Title]
[Recipient Organization]
[Recipient Address]
[City, State, Zip Code]

Dear [Recipient Name],

I am pleased to confirm your participation in the QNP (Quality Network Program) for the upcoming session starting on [start date]. Your involvement is vital to the success of the program, and we are excited to have you on board.

As a participant, you will have the opportunity to [briefly outline key benefits or activities of the program]. Please ensure that you review the attached agenda and prepare any necessary documentation prior to our first meeting.

Should you have any questions or require further information, feel free to reach out at any time.

Welcome to the QNP!

Best regards,

[Your Signature (if sending a hard copy)]
[Your Printed Name]
[Your Title]
[Your Organization]