

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

[Recipient Name]
[Recipient Title]
[Organization Name]
[Organization Address]
[City, State, Zip Code]

Dear [Recipient Name],

I am writing to confirm my participation in the QWAP program scheduled for [start date] to [end date] at [location]. I am excited to take part in this opportunity and look forward to contributing to [specific goals or objectives of the program].

Please let me know if there are any additional materials or preparations needed prior to the event.

Thank you for this opportunity.

Sincerely,

[Your Name]
[Your Title/Position, if applicable]
[Your Organization, if applicable]