[ON PROJECT LETTERHEAD]

**[DATE]**

Dear Dr. XXXXXXXXXXXX,

A Promotion of the National ALS Registry to Non-referral Centers Project team member identified you as a neurologist that either currently diagnoses and/or cares for persons with ALS or as a neurologist that would diagnose and/or care for persons with ALS if they presented to you. All such neurologists were eligible to receive a train-the-trainer training session and a small group of those neurologists were selected. The purpose of the training session is to provide neurologists and staff with information to educate ALS patients about the National ALS Registry self-enrollment process. We hope the training session will provide the necessary tools to meet this goal.

***Your name was selected as one of our possible train-the-trainer session participants.***

Enclosed is an information sheet for your review. If you agree to participate, you will be asked to complete a 30 minute training session that is convenient to you. Your name will not be associated with the training or any write-up of the training sessions in any way. There are no costs to you to take part accept for your time.

Feel free to call or email if you would like to schedule a training session. If I do not hear from you, we will follow up with you to see if you are interested in participating.

If you have any questions about the training session, please call or email [for Heather insert: 609-613-6930/hjordan@mcking.com OR for Lindsay insert: 404-683-4394].

If you have any other questions or concerns about the project, please email me at wek1@cdc.gov or call me at 770-488-3699.

Sincerely,

Wendy E. Kaye, PhD

Project Director

National ALS Registry Promotion Project

Enclosure