

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Position]
[Organization/Facility Name]
[Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to inquire about respite care services available at [Organization/Facility Name] for [Name of the person needing care, e.g., my mother, father, etc.].

Due to [briefly explain the situation, e.g., my caregiving responsibilities, personal health issues, etc.], I am seeking temporary assistance to ensure that [Name] receives the care they need in a safe and supportive environment.

I would appreciate any information you could provide regarding:

1. The types of respite care services offered
2. Availability and duration of care
3. Costs and payment options
4. Any application or intake process

Please let me know if there are specific forms or documentation required to proceed. I appreciate your assistance and look forward to your prompt reply.

Thank you for your attention to this matter.

Sincerely,

[Your Name]