

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

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

Dear [Recipient Name],

I hope this message finds you well. I am writing to formally request permission to perform wudu (ablution) during my time at [Location or Event] on [specific date(s) or time frame].

As a practicing [Your Faith or Religion], it is important for me to maintain my religious practices, and having the ability to perform wudu is essential to my routine. I kindly ask for your understanding and support in facilitating this request.

Thank you for considering my request. I look forward to your positive response.

Sincerely,

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