

Information Request for Memory Care Assessment Options

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to request information regarding assessment options for memory care services available in [specific location or facility name, if applicable].

As a concerned family member, I am seeking comprehensive assessments that can guide us in making informed decisions about the best care for [Name of the Person Needing Care]. I would appreciate details on the following:

- Types of assessments offered
- Eligibility criteria
- Costs and insurance options
- Duration and logistics of the assessment process
- Follow-up services available after assessment

Please let me know if there are any forms I need to complete or if I need to schedule a consultation. I am eager to understand the options available to us and would appreciate receiving any brochures or digital resources you might have.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]