

Inquiry for Health Screening Program

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

To Whom It May Concern,

I hope this message finds you well. I am writing to inquire about the details of your health screening program. I am particularly interested in the following aspects:

- Types of screenings provided
- Eligibility requirements
- Schedule and locations
- Cost and payment options
- Any preparatory steps needed prior to the screening

Thank you for your assistance. I look forward to your prompt response.

Sincerely,

[Your Name]