

Maternity Care Service Inquiry

Date: [Insert Date]

To: [Maternity Care Provider Name]

Address: [Provider Address]

Dear [Provider's Name],

I hope this message finds you well. My name is [Your Name], and I am currently expecting a baby. I am reaching out to inquire about the maternity care services your facility offers.

Specifically, I would like to know more about the following:

- Types of prenatal care services
- Labor and delivery options
- Postnatal care and support
- Available classes for expectant parents
- Insurance and payment options

Your assistance in providing this information would be greatly appreciated as I plan for my maternity care. I look forward to your prompt response.

Thank you for your time.

Sincerely,

[Your Name]

[Your Contact Information]