

Agency Letterhead

Date

Sickle Cell Center Directors

Meharry Sickle Cell Center

1005 Dr. D.B. Todd Blvd.

Nashville, TN 37208

Dear MSCC Directors,

The purpose of this letter is to request your services for our Agency (NAME) on (DATE), from (XX am to XX pm TIME). We are located at

- Address of the event
- Internal location of the education/screening site
- On-site contact person's name, email, and phone number.
- Services requested: i.e., education and/or Sickle cell screening.
- Approximate number of individuals that will be screened.

Thank you for your kind attention to this matter. Please let us know if you will be able to accommodate our event, and also specify your needs to carry on the service we are requesting.

Sincerely,

XXXXX

Position

Phone and email address