

[Date]

[Client Name]

[Client Address]

[City, State, Zip Code]

**Subject: Delivery of Short-Term Event Insurance Policy - [Policy Number]**

Dear [Client Name],

Thank you for choosing [Insurance Company Name] for your event insurance needs. We are pleased to confirm that your short-term coverage for [Event Name] is now active.

Please find your policy documents attached. This package includes:

- Policy Declarations Page
- Certificate of Insurance
- Terms and Conditions
- Claims Reporting Instructions

**Event Details:**

- **Policy Number:** [Policy Number]
- **Coverage Period:** [Start Date] to [End Date]
- **Event Venue:** [Venue Name/Location]

We recommend that you review these documents carefully to ensure all details are correct. If you are required to provide proof of insurance to your venue, the enclosed Certificate of Insurance should meet their requirements.

If you have any questions or need to make changes to your coverage, please contact us at [Phone Number] or [Email Address].

We hope you have a successful and safe event.

Sincerely,

[Your Name/Representative Name]

[Title]

[Insurance Company Name]