

Notification of Changes to Your Travel Insurance Coverage

Date: [Insert Date]

Dear [Client's Name],

We are writing to inform you of changes to your travel insurance coverage effective from [Effective Date]. Your updated policy will reflect the following adjustments:

- Increased coverage limit for medical expenses from [Old Amount] to [New Amount].
- Adjustment in trip cancellation coverage from [Old Amount] to [New Amount].
- Extension of coverage for personal belongings.

Please review the attached document for detailed information about your updated policy. If you have any questions or require further clarification, do not hesitate to contact us at [Contact Information].

Thank you for choosing us as your travel insurance provider. We appreciate your trust and commitment.

Sincerely,

[Your Company Name]
[Your Contact Information]