

Event Insurance Confirmation

Date: [Insert Date]

[Your Organization's Name]

[Your Organization's Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Recipient's Organization]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

We are pleased to confirm that [Your Organization's Name] has secured event insurance for the upcoming [Event Name] scheduled on [Event Date]. The insurance coverage includes:

- General Liability
- Property Damage
- Personal Injury

The policy number is [Policy Number], and the coverage is valid from [Start Date] to [End Date].

Please keep this letter for your records and do not hesitate to reach out if you require any further information.

Thank you for your commitment to supporting our mission.

Sincerely,

[Your Name]

[Your Title]

[Your Organization's Name]