*Dear Principal/Secretary (Nominated name)*

*Your school, as Policyholder of a Personal Accident policy covering the student body for personal injury and expenses, is hereby notified of a claim made under your policy.*

*The claim relates to an incident/accident which occurred on \_\_\_\_\_\_\_\_\_\_\_\_\_.*

*The claim is made by* ***First Name Second Name****.*

*In order to detect claims which should not be paid, we are monitoring notifications, and* ***we request that you, as nominated contact in your school, review the claimant name details above to satisfy yourself that this student was registered at the time of the incident.***

*If this person* ***was not*** *a registered Student at the time of the incident, please advise IPB by replying to this email, incorporating the Subject line above. There is no action required by you if this person was a registered Student at the time of the incident.*

*If you have any queries, please contact* *claims@ipb.ie*