BLACK HAT EUROPE 2010 TRAINING CLASS CHANGE REQUEST FORM

Use one form per registrant. This form is for those who have an existing EUROPE 2010 Training registration and have an existing Confirmation Number. If you do not have a Confirmation Number from your online registration, you MAY NOT use this form and must register online. All Seats are First Come, First Paid, First Served. You must return this form to us no later than March 15, 2009. To register complete the form below as well as the Add A Class form and return it to: Email: bh-reg@blackhat.com Fax: +1 206 219 4143 Tel: +1 206 443 5489 (GMT-8)

	Class Name 03.03	Original		Requested
	Designing Secure Protocols and Intercepting Secure Communications by Moxie Marlinspike			
	Exploit Laboratory: analyzing Vulnerabilities and Writing Exploits by Saumil Shah			
	Finding Security Bugs in Closed-source Software: Advanced by Halvar Flake *CANCELED*			█
	Hacking by Numbers: Bootcamp by Sensepost			
	Hands-On Hardware Hacking & Reverse Engineering Techniques by Joe Grand			
	Information Assurance Officer (IAO) Training (CNSS-4014E) by IA2 *CANCELED*			█
	Mac Hacking by Vincenzo Iozzo *CANCELED*			█
	Malware Analysis: Black Hat Edition by MANDIANT			
	RFID, Access Control & Biometric Systems by Zac Franken & Adam Laurie *CANCELED*			█
	SAP Security In-Depth by Mariano Nunez Di Croce			
	TCP/IP Weapons School by Richard Bejtlich			
	Ultimate Hacking: Wireless Edition by Foundstone			
	Virtualization (In)Security by Rafal Wojtczuk & Joanna Rutkowska			
	WarfaRE-Offensive Reverse Engineering by Pedram Amini and Ero Carrera *CANCELED*			█
	Web Application (In) Security by NGS Software			

Registrant Name

_____

Confirmation Reference Number

_____

☐ I understand that if there is a difference in class cost, I will be responsible for paying the difference if the requested class is more expensive than the original class. If the original class is less expensive, I will be issued a refund.

☐ I understand that my seat in a training class is not confirmed until payment has been received. Black Hat reserves the right to cancel my Training registration should I fail to provide payment in full within 7 days of submitting this form.

Method of Payment

☐ I will be paying by Check or Money Order
☐ I will be paying by Wire Transfer
☐ Please charge my credit card, for the amount indicated with the provided information below. I understand the credit card charge will show up as UBM LLC and will be in Euros.

Total to be charged to the credit card: _____

Company VAT number: _____

Name on Card _____

Expiry: month _____ / year_____

Type (circle one) VISA / MC / AMEX

CVV/CV2 Number (security code on credit card) _____

Card Number _____

Signature_____

Card Billing Street Address _____

City, State / Province, Postal Code

_____

Card Billing Telephone Number_____