

BLACK HAT ABU DHABI 2011 CANCELLATION REQUEST FORM

Use one form per registrant. Complete this form and return it NO LATER than November 1 to:

Email: blackhatregistration@ubm.com Fax +1 415 947 6011 Tel: +1 866 203 8081 (GMT – 8)

CANCELLATIONS MADE AFTER NOVEMBER 1 DEADLINE WILL NOT RECEIVE A REFUND.

Registrant Name

Confirmation Number

Type of cancellation requested. Please select only one.

Select this if you are not attending any portion of the conference.

- I understand that I am canceling my registration in its entirety and that I will be sent a refund minus the \$300 administration fee as detailed under the Registration Terms and Conditions that I agreed to when I registered.

Select this if you registered for the Briefings as well but are only canceling your Training registration.

- I am requesting a cancellation of the (circle one or both) WEEKEND TRAINING / WEEKDAY TRAINING portion of my registration but will still be attending the Briefings. If I choose to re-register at a later date, I will be subject to the Registration Terms and Conditions. I understand I will be sent a refund minus the Briefings fees.

Select this if you registered for the Training as well but are only canceling your Briefings registration.

- I am requesting a cancellation of the BRIEFINGS portion of my registration but will still be attending Training. If I choose to re-register at a later date, I will be subject to the Registration Terms and Conditions. I understand I will be sent a refund minus the Training fee.

Refund:

- Please refund the credit card that was originally charged, for the amount indicated.
- Please send the refund via check to the person and address as indicated on page 2.
- Please send the refund via wire to the person and account as indicated on page 3.

BLACK HAT ABU DHABI 2011 CANCELLATION REQUEST FORM

Refund via Check Request

Complete this portion only if you are requesting a check via refund. Only original registration fees that were originally paid via check or wire transfers will be sent a refund via check. Return Cancellation and Check Request Refund form. CANCELLATIONS MADE AFTER NOVEMBER 1 DEADLINE WILL NOT RECEIVE A REFUND.

Please attach a W9 as per our Terms & Conditions

Total to be refunded: \$_____

Contact Name: _____

Contact Email Address _____

Contact Telephone Number _____

Name the check should be endorsed to

Street address check will be mailed to

City

State / Province

Postal Code

Country

BLACK HAT ABU DHABI 2011 CANCELLATION REQUEST FORM

Refund via Wire Transfer

Complete this portion only if you are requesting a Wire Transfer refund. Only original registration fees that were originally paid via wire transfers will be sent a refund via wire. Return Cancellation and Wire Transfer Request Refund form.

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Please attach a W8 for International Wire Refunds, as per our Terms & Conditions.

Amount of wire: _____

Date of request: _____

Contact Name: _____

Email Address: _____

Telephone Number: _____

Bank Account Name: _____

Bank Name: _____

Bank Address _____

Bank Account Number: _____

ABA: _____

SWIFT Code: _____

Federal Tax ID Number: _____