BLACK HAT DC 2011 ADD A CLASS REQUEST FORM INSTRUCTIONS

Use one form per registrant.

This form is for those who have an existing DC 2011 Training registration and have an existing Confirmation Number.

If you do not have an 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 Dec 15, 2010. To blackhatregistration@ubm.com or fax 1 415-947-6011

Note that some courses may be sold out and your request will be based on **availability.**

BLACK HAT DC 2011 TRAINING ADD A CLASS FORM

Use one form per registrant. This form is for those who have an existing DC 2011 Training registration and have an existing Order Reference Number. If you do not have an Order Reference 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 Dec 15, 2010. Complete this form and return it to Email: blackhatregistration@ubm.com or Fax +1 415 947-6011

Check added class	Training Courses	Instructor	Super Early	Early	Regular	Late
	Briefings January 18-19	Varied Presenters	1095	1295	1395	1595
	Weekday, Two-Day Training Course					
	Cyber Network Defense Bootcamp	Adam Meyers	2200	2400	2600	2800
	Designing Secure Protocols and Intercepting Secure Communication	Moxie Marlinspike	1900	2100	2300	2500
	Tactical Exploitation	Val Smith	3000	3200	3400	3600
	TCP/IP Weapons School 3.0	Richard Bejtlich	2000	2200	2400	2600
	Windows Physical Memory Acquisition and Analysis	Matthieu Suiche	1800	2000	2200	2400

BLACK HAT DC 2011 PAYMENT FORM

To register complete the form below as well as the Add A Class Form and return it to: Email: blackhatregistration@ubm.com Fax +1 415 947 6011 Tel: +1 866 203 8081 (GMT -8)

Please complete this form in its entirety and legibly. Registrant Name Confirmation Number ☐ 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 Method of Payment ☐ Please charge my credit card, for the amount indicated with the provided information below. I understand the credit card charge will show up as Black Hat-TechWeb-UBM and will be in US Dollars. Total to be charged to the credit card: _____ Name on Card Card Number Expiry: month _____ / year____ Type (circle one) VISA / MC / AMEX CVV/CV2 Number (security code on credit card) Signature Card Billing Street Address City, State / Province, Postal Code Card Billing Telephone Number