

BLACK HAT DC 2010 TRAINING CLASS CHANGE REQUEST FORM

Use one form per registrant. This form is for those who have an existing DC 2010 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. Place check mark in Original selected course column, and then place a check mark in the Requested new course column. All Seats are First Come, First Paid, First Served. You must return this form to us no later than January 01, 2010.

	Class Name v10-28	Original	Requested
1	Designing Secure Protocols and Intercepting Secure Communication-Moxie Marlinspike		
2	Detecting & Mitigating Attacks Using Network Infrastructure- Cisco Systems		
3	Finding Security Bugs in Closed-source Software-Halvar Flake		
4	Hacking By Numbers: Bootcamp-Sensepost		
5	Hacking By Numbers: PCI-Sensepost **CANCELED**		
6	Hands-On Hardware Hacking & Reverse Engineering Techniques-Joe Grand		
7	Incident Response Black Hat Edition-MANDIANT		
8	Mac Hacking-Vincenzo Iozzo		
9	Reverse Engineering with IDA Pro-Chris Eagle		
10	Secure the Human-Lance Spitzner		
11	Senior systems Manager (CNSS-4012 (Certified)) - IA2		
12	Tactical Exploitation-HD Moore		
13	TCP/IP Weapons School 2.0-TaoSecurity		
14	Ultimate Hacking: Wireless Edition-Foundstone		
15	Web Application (In)Security-NGS		

To change registration complete the form below as well as the Class Change Request Form and return it to: Email: bh-reg@blackhat.com Fax +1 206 219 4143 Tel: +1 206 443 5489 (GMT - 8)

Please complete this form in its entirety and legibly.
Registrant Name

Order Reference Number (the first 10 characters will suffice)

*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 Black Hat - TechWeb - UBM LLC and will be in US Dollars.

Total to be charged to the credit card: _____

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 _____

Card Holder Email Address (receipt) _____