

# BLACK HAT US 2006 CANCELLATION REQUEST FORM

Use one form per registrant. Complete this form and return it NO LATER than June 30 to:

Email: bh-reg@blackhat.com

Fax +1 206 219 4143

Tel: +1 206 443 5489 (GMT - 8)

Registrant Name

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Order Reference Number

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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.

Total to be refunded: \_\_\_\_\_

Contact Email Address \_\_\_\_\_

Contact Telephone Number \_\_\_\_\_

# **BLACK HAT US 2006 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 BOTH pages to us only if requesting a refund via check.

Name the check should be endorsed to

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Street address check will be mailed to

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City

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State / Province

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Postal Code

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Country

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