



COMPLETE & EMAIL TO:  
blackhatregistration@ubm.com  
SUBJECT LINE:  
Black Hat Europe 2018

## REGISTRATION CHANGE REQUEST

Questions?  
415-947-6846

### REGISTRANT INFO

Date: \_\_\_\_\_ Confirmation Number: \_\_\_\_\_  
(Listed on Registration Invoice)  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

### CHANGE REQUEST

*\*All changes are subject to conference terms & conditions. Deadlines for cancellations will be enforced; please refer to your confirmation receipt for specific cancellation dates.*

*\*For paid upgrades, a Customer Support agent will contact you regarding your payment, or you can call Customer Support at 415-947-6846.*

- UPGRADE** Change current pass type to: \_\_\_\_\_ \*Note there may be a change in cost
- DOWNGRADE** Change current pass type to: \_\_\_\_\_ \*Downgrades with refunds are accepted through October 26, 2018.
- CANCEL** All cancellations are subject to a \$300 fee through October, 26 2018. No refunds will be issued after October 26, 2018.
- SUBSTITUTE** Enter new registrant's information below; signature of the original registrant must be provided.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Company: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_  
 Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Phone: \_\_\_\_\_

I request and authorize the above substitution to be made to my registration.

Signed: \_\_\_\_\_  
Printed Name: \_\_\_\_\_

Other request:  
\_\_\_\_\_  
\_\_\_\_\_

Office Use Only:

Date Processed: \_\_\_\_\_ Agent Initials: \_\_\_\_\_