



REGISTRATION UPDATE FORM
Event Registration Services Group

Please complete this form with your updates and return it to enterpriseconnectregistration@ubm.com.
If changes are needed while an event is taking place, please bring this form on-site to the Customer Service desk.

Date: _____ **Confirmation #:** (Located on receipt or invoice) _____

Registrants First Name: _____ **Last Name:** _____

Conference: _____

Requested Change: (Please note that all changes are subject to conference terms and conditions. Deadlines for cancellations or downgrades will be enforced, please refer to your confirmation receipt for specific cancellation dates.)

___ **UPGRADE:** Change current pass to: _____
Please include credit card payment details below to pay for the cost difference

___ **DOWNGRADE:** Change current pass to: _____
If a refund is due, the cost difference will be refunded via the same method as the original payment

___ **CANCELATION:** Please note that all cancellations are subject to a fee. Please refer to your original receipt for details.

___ **SUBSTITUTION:** Enter new registrant information below and provide signature of original registrant who is making the request:

New registrants first and last name: _____

Email: _____

Job Title: _____ **Company:** _____

Address: _____ **Phone:** _____

City, State, Zip/Postal Code/Country: _____

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

Signed: _____

Printed Name: _____

Other Request:

CREDIT CARD PAYMENT INFORMATION

For your privacy and safety, a Customer Support agent will contact you regarding your payment with 48 hours, or you can call Customer Support at (866) 203-8169 / (415) 947-6858 from 7:00 AM – 4:00 PM Pacific Time, Monday - Friday.

Office Use Only:

Date Processed: _____ **Initials:** _____ **New Conf #:** _____

www.enterpriseconnect.com