

ONE CONVENTION BOULEVARD
ATLANTIC CITY, NJ 08401 USA



PHONE (609) 449-2291
FAX (609) 449-2464 FED ID#222638563

SHOW NAME: _____ COMPANY NAME: _____ BOOTH #: _____

SERVICE ORDER(S) PAYMENT FORM

Payment Required for Electrical, Cleaning and Plumbing. No Service will be provided without payment and completed service order forms. The Advance Rate will only be valid and processed for orders with payment received 15 days prior to the show opening date. By signing below you acknowledge and agree to these terms and authorize the Atlantic City Convention Center to charge your credit card. No credits will be issued on unused services installed as ordered. Claims cannot be considered unless filed by the exhibitor prior to the close of show. Cancellations must be faxed to our office three days prior to show opening date. Electricity will be turned on within 30 minutes of show opening and off within 30 minutes after show closing. No refunds will be issued on unused services installed as ordered.

Section 1 (Company Information)

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Name: _____ Contact Signature: _____
(Please Print)

Phone: _____ Fax: _____

Email Address: _____

Section 2 (Billing Credit Card Expiration Date Must Be Valid Throughout The Event Listed Above)

AMERICAN EXPRESS MASTERCARD VISA DISCOVER CARD

Card Number: _____ Expiration Date: _____ / _____
MONTH YEAR

Card Holders Name: _____
(Please Print)

Card Holders (Signature): _____ Date: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Contact: _____ Phone: _____ Fax: _____

Section 3

Please Check Here If Tax Exempt, Please fax New Jersey Tax Exempt Form with Payment

By signing and delivering this form, the customer agrees to all terms and conditions printed on this form.

Signature: _____

