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6575 Delilah Road
PO Box 3000
Pleasantville, NJ 08232
WWW.VISTACS.COM

P: 609-485-2421
F: 609-485-2392

**ATLANTIC CITY CONVENTION CENTER
ATLANTIC CITY, NJ
DECEMBER 9-10, 2025**

PAYMENT & CREDIT CARD AUTHORIZATION FORM

Please complete the information requested & return payment in full with this form and your orders. You may choose to pay by credit card, check or bank wire transfer, however; **WE REQUIRE YOUR CREDIT CARD AUTHORIZATION TO BE ON FILE WITH VISTA CONVENTION SERVICES.** For your convenience, we will use this authorization to charge your credit card for any additional amounts incurred as a result of show site orders placed by your representative for this event.

Standard Booth Furnishings & Accessories	\$	_____
Custom Furnishings.....	\$	_____
Carpet/Carpet Padding	\$	_____
Fabric Backwall Display Rental.....	\$	_____
Estimated Labor	\$	_____
Monthly Long Term Storage	\$	_____
Priority Empty Container Return.....	\$	_____
Estimated Material Handling.....	\$	_____
	SUB TOTAL	\$ _____
	*ADD 6.625% NJ SALES TAX	\$ _____
	NET AMOUNT DUE VISTA	\$ _____

*** Note: All Services are Taxable in the State of NJ.**

INDICATE PAYMENT METHOD:

Check # _____ Dated _____ Amount \$ _____

Charge to: ☐ MasterCard ☐ VISA ☐ American Express

Account # _____

Expiration Date _____

CVV _____

Cardholder's Name _____

Cardholder's Address _____ (Print or Type) _____

Signature _____ City _____ State _____ Zip _____

ALL ORDERS SUBJECT TO LIMITS OF LIABILITY.

Company Name _____ Booth # _____

Street Address _____ Phone # _____

City _____ State _____ Zip _____

Ordered by (Print or Type) _____ E-Mail _____

Signature _____

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PAYMENT POLICIES

- Orders received without full payment or credit card information will **NOT** be processed.
- A credit card on file is **required** when using Vista Convention Services
- All charges **must** be paid prior to close of show.
- For your convenience, we accept the following methods of payment: cash, checks and money orders drawn on U.S. banks in U.S. funds, and credit cards including VISA, MasterCard and American Express.
- Purchase Orders are not considered payment, therefore, a check or credit card is required.
- Credit Card refunds are subject to a 3% processing fee.

WIRE TRANSFER

- Bank information call Vista Convention Services (609) 485-2421 or e-mail: dvenezia@vistacs.com
- Wire transfers must be initiated and confirmed at least two weeks before move-in.
- Wire transfers must include the show name, company name and booth number.
- Due to various processing fees we incur from banks clearing wire transfers into our accounts, Vista will charge the following fees:
 - ⇒ **Domestic incoming wire transfer fee: \$25.00**
 - ⇒ **International incoming wire transfer fee: \$35.00**

CANCELLATIONS & ADJUSTMENTS

- Items cancelled before the deadline date will be refunded at 50%, **unless otherwise noted on Order Form.**
NO REFUNDS AFTER DEADLINE DATE.
- **NO** adjustments will be made after close of the show.

TAX EXEMPTION

- If tax exempt, a copy of your tax exempt certificate **MUST** accompany your order. This is **NOT** a resale certificate.
- **NO** adjustments for tax exempt status will be made after close of the show.

THIRD PARTY PAYMENT BILLING

- The exhibiting company is ultimately responsible for the payment of all charges. If no arrangements are made for payment of invoice (s) by the third party prior to the last day of the show, charges will revert back to the exhibitor.

MISCELLANEOUS

- **NO** telephone orders accepted
- Rental items not ordered, yet found in booths, are invoiced at “**Standard**” pricing.
- All prices are in U.S. dollars (\$).
- All rental items are subject to applicable taxes.
- All rental items remain the property of Vista Convention Services.



**ATLANTIC CITY CONVENTION CENTER
ATLANTIC CITY, NJ
DECEMBER 9-10, 2025**

**DEADLINE DATE:
NOVEMBER 24, 2025**

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THIRD PARTY AUTHORIZATION & STATEMENT OF PAYMENT TERMS

You may arrange for a third party to handle your display and be billed for services. *Vista Convention Services* will agree to this arrangement if the third party has a satisfactory payment record with us. **BOTH** firms must complete this form. Return this form by the Discounted Deadline Date. In the event of nonpayment by the third party, the exhibitor agrees to accept responsibility for payment of all charges incurred. **Should the third party fail to present full payment at show site, the exhibitor will assume responsibility for payment.**

EXHIBITING COMPANY NAME: _____ BOOTH# _____

CONTACT PERSON: _____ SIGNATURE: _____

CHECK ITEMS TO BE BILLED TO THIRD PARTY:

_____ All Services _____ Material Handling/In and Out
_____ I&D Labor _____ Rental Furniture & Carpet Other (Please specify) _____

THIRD PARTY'S CREDIT CARD CHARGE AUTHORIZATION **Information must be provided**

☐ MasterCard ☐ Visa ☐ American Express Expiration Date

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Account Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 CVV

--	--	--	--

Cardholder's Signature _____ Print Name _____

Cardholder's Billing Address _____ City _____ State _____ Zip _____ Country _____

THIRD PARTY NAME: _____

CONTACT PERSON: _____ SIGNATURE: _____

SHOW SITE REPRESENTATIVE: _____

PHONE NUMBER: _____ EMAIL: _____