

THE EASTBURG 250TH ALL-AMERICAN PICNIC



Vendor Guidelines & Event Information

Date: July 4th, 2026

Time: 12:00 PM to 5:00 PM

Location: Downtown East Stroudsburg (Crystal Street & Miller Park)

GUIDELINES & RULES

- Vendor spaces are 10x10. Additional spaces must be purchased if exceeded.
- Vendors must supply their own electricity and setup materials including tables, chairs, tents, signage, and weights.
- Quiet generators (60 dB or less) are permitted. Loud generators (71 dB or more) are not permitted
- Food trucks and trailers must be unhitched and vehicles removed from the premises.
- Setup begins at 9:00 AM and must be completed by 11:30 AM.
- All vehicles must be removed by 11:00 AM.
- Event ends at 5:00 PM. No early breakdown is allowed.
- Vendors are responsible for any damage, loss, or theft.
- Vendors must remove all trash. A \$100 fee applies if trash is left behind.
- Insurance is required:
 - General liability: \$1,000,000 per occurrence and \$2,000,000 aggregate.
 - Food trucks require \$1,000,000 commercial auto coverage.
 - Eastburg Community Alliance must be listed as additionally insured.

Contact: info@eastburgcommunityalliance.com

Vendors will receive confirmation and setup instructions via email prior to the event.

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2026 Vendor Application

IMPORTANT NOTICES

- Food vendors must obtain a temporary health license prior to the event.
- Contact the Health Officer at 570-421-8300 x105 for details.
- Beverage vendors may not sell open alcohol.
- Prepared beverage vendors require a temporary license.

VENDOR SPACE OPTIONS

Category	Fee
<input type="checkbox"/> Prepared Food or Beverage Vendor (10x10 Space)	\$100.00
<input type="checkbox"/> Food Truck Vendor (10x10 Space)	\$100.00
<input type="checkbox"/> Beverage Tasting Vendor (10x10 Space)	\$100.00

BUSINESS INFORMATION

Business or Organization Name: _____
Food Truck Size (if applicable): _____ Contact Person: _____
Business Address: _____ City: _____
State: _____ Zip Code: _____ Phone: _____
Email: _____

PAYMENT INFORMATION

Payment Amount: \$ _____
Payment Method:
 Check (payable to Eastburg Community Alliance)
 Credit Card
Card Number: _____ CVV: _____
Expiration Date (MM/YY): _____ Billing Zip: _____

Full payment and proof of insurance are required to secure a vendor space.

Description & Agreement

VENDOR DESCRIPTION

Please explain what you plan to display, distribute, or sell at your vendor space:

Vendor registration deadline is May 31, 2026

VENDOR LIABILITY AGREEMENT

- Vendor accepts full responsibility for injury, damage, loss, or theft.
- Vendor agrees to indemnify and hold harmless the Eastburg Community Alliance and all affiliates.
- Vendor confirms submission of required insurance.

Signature: _____ Date: _____

Printed Name: _____

VENDOR CHECKLIST

- Completed application (Page 2)
- Proof of insurance
- Completed liability form (Page 3)
- Payment in full

READY TO SUBMIT?

Send completed application and required materials to:

✉ info@eastburgcommunityalliance.com

or

📍 **Eastburg Community Alliance**
5 South Kistler Street
East Stroudsburg, PA 18301