

BITE OF BLAIRSTOWN & BEYOND

Restaurant / Food Vendor Application

Hosted by the Blairstown Rotary Club

Event Date: Monday, June 8

Time: 6:00 PM

Location: Brook Hollow Winery, 594 Route 94, Columbia, NJ 07832

Estimated Attendance: ~150 guests

Vendor Space: 8' x 8' (6 ft tables available)

Business Information

Restaurant / Business Name:

Contact Person:

Title / Role:

Phone Number:

Email Address:

Business Address:

Website / Social Media:

Participation Details

Type of Food / Cuisine:

Sample(s) You Plan to Serve:

Hot / Cold / Room Temp:

Allergen / Dietary Notes:

Equipment & Setup Needs

Do you need a 6 ft table provided? Yes / No

Do you require electricity? Yes / No

Equipment to be plugged in:

Additional equipment you will bring:

Gift Card Contribution

Each vendor is asked to provide a \$50+ gift card.

Gift card amount: \$50 Other: _____

Gift card delivery:

Drop off in advance / Bring night of event

Agreement

By submitting this application, I agree to:

- Provide Blairstown Rotary with a Certificate of Insurance
- Provide bite-sized samples for approx. 150 guests
- Bring plates, napkins, and cutlery as needed
- Follow all food safety guidelines
- Arrive in time for setup before 6:00 PM
- Provide the agreed-upon gift card for the raffle

Signature: _____

Name (print): _____

Date: _____

Return Application by March 1, 2026 To:

Blairstown Rotary Club—PO Box 747—Blairstown, NJ 07825

Contact: Denise Stanley

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Phone: 201-572-1547