

WILTON'S COMMUNITY DAY PARKFEST

10 Lewis Drive, Saratoga Springs, NY 12866

Saturday, June 20, 2026
12 p.m. - 9 p.m.

Set up time: 9:00 a.m. - 11:00 a.m.

Pricing

\$30 per space – must provide your own 10x10 tent

\$10 access to electrical – limited availability, first come first served.

\$10 – one 8' table with 2 chairs

Please send separate check for electrical access. Checks should be made payable to The Town of Wilton and will be returned in the event that no additional spaces or electrical access space is available.

Registration forms and payment can be mailed to: Gavin Park, 10 Lewis Drive, Saratoga Springs NY 12866

Rules/Regulations

- 30 vendor spaces available
- NO refunds issued after registration closes on June 1st.
- No weapons of any kind are permitted on the premises.
- Vendors are responsible for their own table security.
- Vendors will be issued one vehicle pass per booth for field access/set up. Any additional vehicles will be required to park in the public parking area.
- Vendors must leave their space clean...please take your trash with you when you leave.
- Confirmations will be emailed. Please provide a valid email address (print clearly). If email is not available, please provide valid telephone number.

WILTON'S COMMUNITY DAY

PARKFEST

Name of contact person: _____

Name of company/booth (for map/advertising): _____

Mailing address: _____

Phone (prefer cell phone #): _____

Email address (please print clearly): _____

Description of craft/vendor items: _____

Saturday, June 20, 2026

10' x 10' booth Must provide own tent	\$30 - each	_____ # of spaces	\$ _____
1 table, 2 chairs (set)	\$10 - per set	_____ # of sets	\$ _____
Access to electric*	\$10		\$ _____

*limited # available along the back row of the vendor area.

Please send separate \$10 check for electric (which will be returned in the event that no electrical spaces are available)

WAIVER OF LIABILITY: By completing this registration and participating in this event, the undersigned, or agent, agrees to *HOLD HARMLESS* the Town of Wilton, its agents, and its employees from and against all claims, damages, losses, and expenses (including, but not limited to attorney's fees), arising out of or resulting from any injuries or damages which may incur while participating in this event.

Signature: _____

Print Name: _____

Amount Paid: \$ _____

Check #: _____

Date: _____

CONFIRMATION WILL BE SENT TO YOU BY EMAIL

Office Use:

Date Received: _____ Confirmed? Yes or No If New Vendor, photos received? Yes or No

Extras Requested: _____ Fees Paid? Check(s) # _____