

Building Utilization Request



Pioneer Career and Technology Center

ATTN: Director of Business Affairs
27 Ryan Road, Shelby, OH 44875

Part I - To be completed by organization requesting building utilization

Date(s) 10/1/2020	Setup Time	Tear Down Time	Date Request Submitted
Activity: Day(s) Thursday			June 10, 2020
Event Time(s) 10:45-12:00	8:00	1:30	Room(s) / Area Requested:
Name of Organization and Event Being Held October Principals Meeting	Number of Persons Attending Meeting 30		Community Room
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)	
Contact Person: Tina Hurst, ext. 42200		Business Name: _____	
Phone Numbers: Home: _____		Contact Person: _____	
Work: _____ Cell: _____		Phone Number: _____	
PCTC Requested Services: (Identify No. Needed)		Address: _____	
<u>Café</u> OR <u>Culinary Arts</u> <u>Room Setup</u> <u>Electronic</u> <input checked="" type="checkbox"/> Chairs _____ Microphone _____ Drinks <input checked="" type="checkbox"/> Tables _____ Ovrhd. Proj. _____ Snacks _____ Chalkboard _____ Video Camera _____ Breakfast <input checked="" type="checkbox"/> Lectern _____ Video Recorder _____ Luncheon _____ Coat Racks _____ Internet Access _____ Dinner		If specific hookup/utility needs are required see attached: (check one) <u>Yes</u> or <u>No</u> Estimated time of arrival at Pioneer for setup/delivery: _____ Other/Specify: <u>Culinary will provide luncheon; details confirmed with Chef as event approaches</u> <u>Please put tables in "U" shape with podium and open end at the east end of room</u>	
For specific room setup, see attached design: (check one) <input checked="" type="checkbox"/> Yes or <u>No</u>		Date of contact with Cafeteria/Culinary Arts Services if used for this event: _____	

Part II - To be completed by PCTC Personnel

Estimate Calculation of Fees: Attach any pertinent papers. Rental Custodial Services Food Services Other Total Fee Estimate Note: Final invoice billing based upon actual costs following the event/activity. Upon receipt of invoice, please make check payable to: Pioneer CTC			Responsibility Notice It is understood that our organization assumes full responsibility for any damage to the building and equipment. A Security Deposit in the amount of \$ _____ is required to confirm scheduling. This will be applied to final invoice upon satisfactory complete of event/activity. Any and all information on this form may be shared with the public through our publicly accessed calendar.
Action Taken	Date	By	
Approved and Booked	9/18/2020	[Signature]	
Billed for Services			
Referred to Board			

It is the policy of Pioneer Career & Technology Center to use these funds for the direct use, improvement, and maintenance of the building utilization areas of the school.

Thank you for selecting Pioneer for your event!