

Building Utilization Request



Pioneer Career and Technology Center

ATTN: Director of Business Affairs
27 Ryan Road, Shelby, OH 4487

Part I - To be completed by organization requesting building utilization

Date(s) <u>February 24th 2026</u>		Setup Time	Tear Down Time	Date Request Submitted
Activity: Day(s) <u>1</u>		<u>4:45pm</u>	<u>10pm</u>	<u>12/12/25</u>
Event Time(s) <u>5pm - 10pm</u>		Room(s) / Area Requested:		
Name of Organization and Event Being Held		Number of Persons Attending Meeting		
<u>O'Reilly Auto Parts / Real World Training</u>		<u>20 - 40 people</u>		<u>C 109 Community Room</u>
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
<u>200 Patterson Ave Springfield, Missouri</u>				
Contact Person: <u>J.R. Tralco Aff Jr.</u>		Business Name: <u>Outside Food (TBD)</u>		
Phone Numbers: Home: <u>567 275-0814</u>		Contact Person:		
Work: <u>419 989-1393</u> Cell: <u>419 989-1393</u>		Phone Number:		
PCTC Requested Services: (Identify No. Needed)		Address:		

<u>Room Setup</u>	<u>Electronic</u>	<u>Café</u> OR <u>Culinary Arts</u>
<input checked="" type="checkbox"/> Chairs	<input checked="" type="checkbox"/> Microphone	<input type="checkbox"/> Drinks
<input checked="" type="checkbox"/> Tables	<input type="checkbox"/> Ovrd. Proj.	<input type="checkbox"/> Snacks
<input type="checkbox"/> Chalkboard	<input type="checkbox"/> Video Camera	<input type="checkbox"/> Breakfast
<input checked="" type="checkbox"/> Lectern	<input type="checkbox"/> Video Recorder	<input type="checkbox"/> Luncheon
<input type="checkbox"/> Coat Racks	<input checked="" type="checkbox"/> Internet Access	<input type="checkbox"/> Dinner

For specific room setup, see attached design: (check one)
☐ Yes or ☐ No

If specific hookup/utility needs are required see attached:
(check one) ☐ Yes or ☐ No
Estimated time of arrival at Pioneer for setup/delivery:

Other/Specify:

Date of contact with Cafeteria/Culinary Arts Services if used for this event:

Part II - To be completed by PCTC Personnel

Responsibility Notice

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

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.

[Signature] TSM 729
Signature (person in charge of activity)

Date: 12/12/25

Thank you for selecting Pioneer for your event!

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