Building Utilization Request



Pioneer Career and Technology Center

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

Perith-To be complet	ted by organizatio	op ikadinkezipyi	g building oo	Hization			
Date(s) 9/16	2/16, 2/17,	Setup Time	Tear Down	Date Request Submitted			
Activity: Day(s) Frida			Time	September 13, 2016			
Event Time(s)	8:50-10:20		7:30	11:00	Room(s) / Area Requested:		
Name of Organization as	eld		of Persons	ARENA			
CTSO for Skills		Attendin	Attending Meeting				
		_	Comrigos	240			
Address			Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)				
				` · · · · · · · · · · · · · · · · · · ·			
Contact Person: Bobb		 		Business Name:			
Phone Numbers: Home:			-	Contact Person:			
Work:	Cell:		Phone Nu	mber:			
				Address:			
PCTC Requested Service	-	-	If specific hookup/utility needs are required see attached:				
<u>Café</u> OR <u>Room Setup</u> <u>Electronic</u> <u>Culinary Arts</u>			· '	(check one)Yes orNo Estimated time of arrival at Pioneer for setup/delivery:			
•	<u>ome</u> Licrophone	Drinks		i tiiiio oi airrai	at I foncer for setup/defivery.		
	— · — I				Other/Specify:		
_	Video Camera	Breakfas	1				
	_	Lunched	-				
	/ideo Recorder _		²¹¹				
	nternet Access	Dinner	Data of a	Date of contact with Cofetenia/Onlineary Auto Coming			
For specific room setup, see	e attached design: (c	neck one)	ľ	Date of contact with Cafeteria/Culinary Arts Services			
X Yes or No	227			if used for this event:			
Pant - To be comple					nsibility Notice		
Estimate Calculation of	ertinent paper		It is understood that our organization assumes full				
Rental	ę. <u>. </u>		•	responsibility for any damage to the building and equipment.			
Custodial Services		- Cquipin	one.				
Food Services			A Security Deposit in the amount of \$				
Other		_	is required to confirm scheduling. This will be applied to final invoice upon satisfactory complete of				
Total Fee Estimate				event/activity.			
Note: Final invoice billing based upon actual costs							
following the event/activity.			— Any an	Any and all information on this form may be			
Upon receipt of invoice, please make check payable to: Pioneer CTC			Sharea	shared with the public through our publicly			
	T	accesse	d calendar.				
Action Taken	Date	By	,				
Approved and Booked	9/15/2010	MXB	<u> </u>	Giour-t /			
Billed for Services			Detail	Signature (pers	son in charge of activity)		
Referred to Board			Date: _				

GROUP A SEATING

ROW 1: POWER EQUIP	ROW 2: CARPENTRY	ROW 3: CARPENTRY	ROW 4: ENV SERVICES	ROW 5: HOME REMODELING	ROW 6: MASONRY			
<	1	_	_	C	<u> </u>		ш	
ROW 1: AUTO TECH	ROW 2: AUTO TECH	ROW 3: AUTO TECH LEVEL 1	ROW 4: COLLISION REPAIR	ROW 5: IND DIESEL	ROW 6: IND DIESEL	20 seats across on each side per row		