

*Kth*

# 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) <b>December 17 &amp; 18, 2019</b>		Setup Time	Tear Down Time	Date Request Submitted <b>October 31, 2019</b>
Activity: Day(s) _____				Room(s) / Area Requested: <b>E108 - All day E110 - 1st period</b>
Event Time(s) <b>07:00-15:00</b>		Name of Organization and Event Being Held <b>Collision Repair - ASE Recertification</b>		Number of Persons Attending Meeting <b>6</b>
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: <b>Paul Brown</b>		Business Name: _____		
Phone Numbers: Home: _____		Contact Person: _____		
Work: _____ Cell: _____		Phone Number: _____		
PCTC Requested Services: (Identify No. Needed)		Address: _____		
_____ Café OR _____ Culinary Arts		If specific hookup/utility needs are required see attached: (check one) <u>Yes</u> or <u>No</u>		
Room Setup Electronic _____		Estimated time of arrival at Pioneer for setup/delivery: _____		
Chairs _____ Microphone _____ Drinks _____		Other/Specify: _____		
Tables _____ Ovrhd. Proj. _____ Snacks _____		_____		
Chalkboard _____ Video Camera _____ Breakfast _____		_____		
Lectern _____ Video Recorder _____ Luncheon _____		_____		
Coat Racks _____ Internet Access _____ Dinner _____		Date of contact with Cafeteria/Culinary Arts Services if used for this event: _____		
For specific room setup, see attached design: (check one) <u>Yes</u> or <u>X No</u>				

### Part II - To be completed by PCTC Personnel

Estimate Calculation of Fees: Attach any pertinent papers.		
Rental .....	_____	
Custodial Services .....	_____	
Food Services .....	_____	
Other .....	_____	
<b>Total Fee Estimate</b>		_____
<b>Note:</b> Final invoice billing based upon actual costs following the event/activity.		
Upon receipt of invoice, please make check payable to: <b>Pioneer CTC</b>		
<b>Action Taken</b>	<b>Date</b>	<b>By</b>
Approved and Booked		
Billed for Services		
Referred to Board		

### 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.

*Paul Brown*  
Signature (person in charge of activity)  
Date: 10/31/2019

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!

Revised 07/15