Building Utilization Request



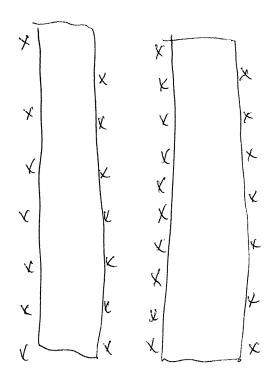
Pioneer Career and Technology Center

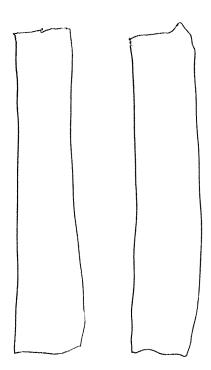
ATTN: Director of Business Affairs 27 Ryan Road, Shelby, OH 44875

Part I - To be completed by organization requesti	ng building u	tilization		
Date(s) 9/14/2020	Setup Time	Tear Down	Date Request Submitted	
Activity: Day(s) mMonday		Time	September 8, 2020	
Event Time(s) 4:00 pm to 5:00 pm			Room(s) / Area Requested:	
Name of Organization and Event Being Held		of Persons	Front half of the Cafeteria.	
Pioneer Satellite Instructors Meeting	Attending			
		32		
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
27 Ryan Road	`			
Contact Person: Matt Parr	Business N	Business Name: The Vault		
Phone Numbers: Home:	_ Contact Pe	erson: Ben La	sh	
Work: Cell: 419 566-6071		Phone Number: 419.565-4296		
	Address:	Address: 29 W. Main St. Shelly OH. 44079		
PCTC Requested Services: (Identify No. Needed)	If specific	If specific hookup/utility needs are required see attached:		
<u>Café</u> OR	1	(check one) Yes or No		
Room Setup Electronic Culinary Art		Estimated time of arrival at Pioneer for setup/delivery:		
X Chairs X Microphone Drinks	3:30 PM	3:30 PM		
X Tables X Ovrhd. Proj. Snacks	Other/Sp	Other/Specify: To be served from the cafeteria.		
Chalkboard Video Camera Breakfas	st			
LecternVideo RecorderLunched	on			
Coat RacksInternet Access X Dinner				
For specific room setup, see attached design: (check one) Date of contact with Cafeteria/C		feteria/Culinary Arts Services		
X Yes or No		if used for this event:		
Part II - To be completed by PCTC Personnel Responsibility Notice				
Estimate Calculation of Fees: Attach any pertinent pape	ers. It is und	It is understood that our organization assumes full responsibility for any damage to the building and		
Rental	respons			
Custodial Services	equipme	ent.		
Food Services	A Secur	rity Deposit in	the amount of \$	
Other		• •	scheduling. This will be	
Total Fee Estimate		applied to final invoice upon satisfactory complete of		
Note: Final invoice billing based upon actual costs	event/ac	ctivity.		
following the event/activity.	A	d all infamma4	ion on this forms were he	
Upon receipt of invoice, please make check payable		Any and all information on this form may be shared with the public through our publicly		
Pioneer CTC		accessed calendar.		
Action Taken Date By				
Approved and Booked 9/9kg 027 VIB				
Billed for Services		Signature (person in charge of activity)		
Referred to Board	Date: _			

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!





Microphone