

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) 5/27/2021	Setup Time	Tear Down Time	Date Request Submitted																		
Activity: Day(s) Thursday			April 6, 2021																		
Event Time(s) 5:30pm	4:30pm	7:30pm	Room(s) / Area Requested:																		
Name of Organization and Event Being Held Adult Education Graduation Ceremony		Number of Persons Attending Meeting 150	Arena																		
Address 27 Ryan Road Shelby OH 44875		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)																			
Contact Person: D. Paullin/J. Eldridge/J. Cooper		Business Name: _____																			
Phone Numbers: Home: _____		Contact Person: _____																			
Work: 419 342-1100 Cell: _____		Phone Number: _____																			
PCTC Requested Services: (Identify No. Needed)		Address: _____																			
<table border="0"> <tr> <td><u>Room Setup</u></td> <td><u>Electronic</u></td> <td><u>Café</u> OR <u>Culinary Arts</u></td> </tr> <tr> <td>## Chairs 1</td> <td>Microphone</td> <td>Drinks</td> </tr> <tr> <td>Tables</td> <td>Ovrhd. Proj.</td> <td>Snacks</td> </tr> <tr> <td>Chalkboard</td> <td>Video Camera</td> <td>Breakfast</td> </tr> <tr> <td>Lectern</td> <td>Video Recorder</td> <td>Luncheon</td> </tr> <tr> <td>Coat Racks 1</td> <td>Internet Access</td> <td>Dinner</td> </tr> </table>		<u>Room Setup</u>	<u>Electronic</u>	<u>Café</u> OR <u>Culinary Arts</u>	## Chairs 1	Microphone	Drinks	Tables	Ovrhd. Proj.	Snacks	Chalkboard	Video Camera	Breakfast	Lectern	Video Recorder	Luncheon	Coat Racks 1	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>Room Setup</u>	<u>Electronic</u>	<u>Café</u> OR <u>Culinary Arts</u>																			
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Coat Racks 1	Internet Access	Dinner																			
For specific room setup, see attached design: (check one) <input checked="" type="checkbox"/> Yes or <input type="checkbox"/> No <u>back</u>		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.

Action Taken	Date	By
Approved and Booked	<u>4/7/2021</u>	<u>WLB</u>
Billed for Services		
Referred to Board		

Julie Eldridge
Signature (person in charge of activity)
Date: 4/6/2021

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!

Chairs 3 rows for staff
6ft — 6ft —

Stage

podium

6ft (3 rows)
6ft —

6ft — 6ft — 6ft — 6ft —
6ft — 6ft — 6ft — 6ft —
6ft — 6ft — 6ft — 6ft —
— continue to fill room