

Building Utilization Request



Pioneer Career and Technology Center

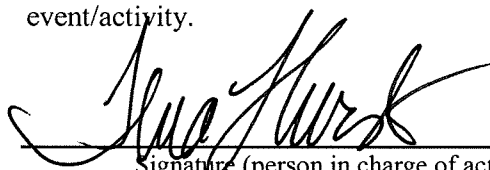
ATTN: Director of Business Affairs
27 Ryan Road, Shelby, OH 44875

Handwritten initials

Part I - To be completed by organization requesting building utilization

Date(s) 9/8/2021		Setup Time	Tear Down Time	Date Request Submitted May 24, 2021
Activity: Day(s) Wednesday				Room(s) / Area Requested: Arena
Event Time(s) 7:30 am - 2:25 pm				
Name of Organization Picture Day		Number of Persons Attending Meeting 950+		
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: Tina Hurst, ext. 42200		Business Name: _____		
Phone Numbers: Home: _____		Contact Person: _____		
Work: _____ Cell: _____		Phone Number: _____		
PCTC Requested Services: (Identify No. Needed)		Address: _____		
Room Setup	Electronic	Café/Culinary Arts		
4 Chairs	____ Microphone	____ Drinks		
4 Tables	____ Ovrhd. Proj.	____ Snacks		
____ Chalkboard	____ Video Camera	____ Luncheon		
____ Lectern	____ Video Recorder	____ Dinner		
____ Coat Racks	____ Internet Access			
For specific room setup, see attached design: (check one)		If specific hookup/utility needs are required see attached: (check one) <u> Yes </u> or <u> No </u>		
x Yes or No		Estimated time of arrival at Pioneer for setup/delivery: 6:30 AM		
		Other/Specify: 4 tables lined up next to stage area; cameras will need to plug in.		
		Date of contact with Cafeteria/Culinary Arts Services if used for this event: _____		

Part II - To be completed by PCTC Personnel

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			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.  Signature (person in charge of activity) Date: _____
Action Taken	Date	By	
Approved and Booked	6/14/2021	NYB	
Billed for Services			
Referred to Board			

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 of the building utilization areas of the school.