Building Utilization Request



Pioneer Career and Technology Center ATTN: Director of Business Affairs

27 Ryan Road, Shelby, OH 44875

Part I - To be comple	ted by organization	on requestir	ig bu	ilding uti	lization 🗼 👢	parety afficiency
Date(s) Sept 27 2016			Soft	Setup Time	Tear Down Time	Date Request Submitted
Activity: Day(s) Tuesday			Sen	up rime		June 3 2016
Event Time(s) 6pm-7pm		5:	00 PM	7:00 PM	Room(s) / Area Requested:
Name of Organization				Number of Persons Preschool Playground with		
ECE- Center Meet and Greet Picnic				Attending Meeting rain option of the Pioneer 130 Cafeteria		
Address				100		
Address				Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: Danielle Ash				Business Name:		
Phone Numbers: Home:				Contact Dougons		
Work: ext 42600 Cell:				m at t		
Work. CAL 42000 Cen.				Address:		
PCTC Requested Services: (Identify No. Needed)				If specific hookup/utility needs are required see attached:		
Room Setup Electronic Café/Culinary Arts				(check one) Yes or No		
Chairs x Microphone Drinks				Estimated time of arrival at Pioneer for setup/delivery:		
x Tables (4) Ovrhd. Proj. Snacks						
Chalkboard Video Camera Luncheon				Other/Specify:		
Lectern Video Recorder Dinner						
Coat Racks Internet Access X Trash Cans						
For specific room setup, see attached design: (check one) (3)				Date of contact with Cafeteria/Culinary Arts Services		
x Yes or No				if used for this event:		
Part II = To be completed by PCTC Reisonnel Responsibility Notice						
Estimate Calculation of Fees: Attach any pertinent papers.				It is understood that our organization assumes full responsibility for any damage to the building and equipment.		
Rental						
Custodial Services						
Food Services						
Other				A Security Deposit in the amount of \$\frac{1}{2}\$ is required to confirm scheduling. This will be applied to final invoice upon satisfactory complete of event/activity.		
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				Si mallan		
Action Taken Date By			┥	Signature (person in charge of activity)		
Approved and Booked	4/4/2016	msB		Date:	6-2-	-16
Billed for Services	2/4/00/0					
Referred to Board				Thank v	ou for selecti	ing Pioneer for your event!

2 Tables

Chairs & Tables Set up for eating

If we have the event on the preschool playground, we will need 9 tables. and 3 large trashians