## **Building Utilization Request**



## Pioneer Career and Technology Center ATTN: Director of Business Affairs

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

Train the completed by organization requesting building utilization						
Date(s) Nove	mber 7-17, 2016		Set	up Time	Tear Down	Date Request Submitted
Activity: Day(s) M-F					Time	June 1, 2016
Event Time(s)						Room(s) / Area Requested:
Name of Organization and Event Being Held				Number of Persons Cafeteria 8:15-10a, Community		
8th grade tours				Attending Meeting Room, DLTC, Arena, as needed		
				Services to be provided by outside person(s)/vendors		
Address				(i.e. caterer, photographer, etc.)		
				, , , , , , , , , , , , , , , , , , , ,		
Contact Person:			-	Business Name:		
Phone Numbers: Home:			-	Contact Person:		
Work: Cell:				Phone Number:		
				Address:		
PCTC Requested Services: (Identify No. Needed)				If specific hookup/utility needs are required see attached:  (check one) Yes or No		
<u>Café</u> OR <u>Room Setup</u> <u>Electronic</u> <u>Culinary Arts</u>				Estimated time of arrival at Pioneer for setup/delivery:		
		. Cuillary Art Drinks	3	Lamiatec	timic of annia	at Fronces for Scrap, desirely.
<del></del>	licrophone	- Snacks		Other/Spe	ecify:	
<del></del>	·	— Breakfa	ot.	Omerspe		
	ideo Camera	<del></del>				
<del>-</del>	ideo Recorder	Lunched				<del></del>
Coat Racks Internet Access Dinner				Date of contact with Cafeteria/Culinary Arts Services		
For specific room setup, see attached design: (check one)						
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 papers.				It is understood that our organization assumes full responsibility for any damage to the building and equipment.		
Rental						
Custodial Services						
Food Services				A Security Deposit in the amount of \$ is required to confirm scheduling. This will be applied to final invoice upon satisfactory complete of		
Other						
Total Fee Estimate				event/activity.		
Note: Final invoice billing based upon actual costs					•	
following the event/activity.				Any and all information on this form may be		
Upon receipt of invoice, please make check payable to:			to:	shared with the public through our publicly		
Pioneer CTC				accesse	d calendar.	
Action Taken	Date	By		\/	4 -	
Approved and Booked	4/6/2016	Mis			Signature (no	rson in charge of activity)
Billed for Services				Date:		Son in charge of activity)
Referred to Board				Date	11/14	

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.

It is the policy of Pioneer Career & Technology Center to use Thank you for selecting Pioneer for your event!