## **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					
Date(s) 22-Nov-16	Se	tup Time	Tear Down	Date Request Submitted	
Activity: Day(s) Tuesday	]		Time	June 1, 2016	
Event Time(s)	7	8	2:00 PM	Room(s) / Area Requested:	
Name of Organization and Event Being Held		2 ( )	of Persons	Arena	
Lexington freshman tours		Attending Meeting			
		100			
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)			
Contact Person: Jim Sorenson/Vickie Hunt	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:			
<u>Café</u> OR		(check one) Yes or No Estimated time of arrival at Pioneer for setup/delivery:			
Room Setup Electronic Culinary A		Estimated time of arrivar at 1 loneer for setup, derivery.			
x Chairs Microphone Drinks		Otto on/Sm	asifu tables	and chaire for 100 students	
x TablesOvrhd. ProjSnacks		Other/Specify: tables and chairs for 100 students to eat lunch in the arena-students will be bringing			
Chalkboard Video Camera Breakt					
Lectern Video Recorder Lunch		packed lunches			
Coat RacksInternet AccessDinner	r	- Line Consider			
For specific room setup, see attached design: (check one)	Date of contact with Cafeteria/Culinary Arts Services				
Yes or No			if used for this event:		
Part II - To be completed by PCTC Personnel		TO DE MINE AND		nsibility Notice	
Estimate Calculation of Fees: Attach any pertinent pap	It is understood that our organization assumes full				
Rental		responsibility for any damage to the building and			
Custodial Services	equipment.				
Food Services	A Security Deposit in the amount of \$				
Other		is required to confirm scheduling. This will be			
Total Fee Estimate		applied to final invoice upon satisfactory complete of 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:		shared with the public through our publicly			
Pioneer CTC		accessed calendar.			
Action Taken Date By			11		
Approved and Booked 6/6/2016 My/2	, 	<u> </u>	Just .	in alcourage of activity.)	
Billed for Services		- D-	Signature (pe	erson in charge of activity)	
Referred to Board		Date:	11/16	octing Pioneer for VolumeVentles	