

## **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) 10/5/2017				tup Time	Tear Down	Date Request Submitted	
Activity: Day(s) Thursday					Time	May 30, 2017	
• • • •	ime(s) 10:27-12:19			9:30	12:30	Room(s) / Area Requested:	
Name of Organization and Event Being Held					of Persons	Becky Nichols laundry room/outside the cafeteria	
Jostens Senior Ordering of graduation items				Attending Meeting room/outside the cafeteria  Seniors			
					_	by outside person(s)/vendors	
Address				(i.e. caterer, photographer, etc.)			
Contact Person: Jim Conrad				Business Name:			
				Contact Person:			
Phone Numbers:	Home:		_	Phone Nu			
Work:	Cell:			Address:			
PCTC Requested Services: (Identify No. Needed)				If specific hookup/utility needs are required see attached:			
Café OR				(check one) Yes or No			
Room Setup	Electronic	Culinary Ar	<u>ts</u>	Estimate	d time of arriva	at Pioneer for setup/delivery:	
x Chairs	Microphone	Drinks					
x Tables	Ovrhd. Proj.	Snacks				have one 8 ft. table outside	
Chalkboard	Video Camera	Breakfa	ıst			hallway and 2 8 ft. tables	
Lectern	Lectern Video Recorder Luncheon		on	insde her laundry room with 2 chairs			
Coat Racks	Internet Access	Dinner					
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 c	ompleted by PCTC Pe	rsonnel	推斷			insibility Notice	
Estimate Calculation of Fees: Attach any pertinent papers.				It is understood that our organization assumes full			
Rental				responsibility for any damage to the building and equipment.			
Custodial Services				┧ ``			
Food Services				A Security Deposit in the amount of \$			
Other				is required to confirm scheduling. This will be applied to final invoice upon satisfactory complete of			
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:			shared with the public through our publicly				
Pioneer CTC				accessed calendar.			
Action Taken Date By				- 1 - 1 think			
Approved and Booked 612 n				Signature (person in charge of activity)			
Billed for Services				Date:	ble	17	
Referred to Boar	d					The state of the s	

It is the policy of Pioneer Career & Technology Center to use Thank you for selecting Pioneer for your eventle se these funds for the direct use, improvement, and maintenance of the building utilization areas of the school.

Revised 07/15