

Building Utilization Request



Pioneer Career and Technology Center

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

Date(s) 1/25/2018 Activity: Day(s) Thursday Event Time(s) 6-8 pm Name of Organization and Event Being Held Soph. Open House Setup Time Tear Down Time May 30, 2017 Room(s) / Area Requested: Cafeteria/Labs/Community Room Services to be provided by outside person(s)/vendors	Part I - To be completed by organization requesting building utilization							
Activity: Day(s) Event Time(s) 6-8 pm Name of Organization and Event Being Held Soph. Open House Address Contact Person: Tina Hurst, ext. 42200 Phone Numbers: Home: Cell: Contact Person: Home: Contact Person: Home: Cell: Contact Person: Work: Cell: Phone Numbers: Home: Contact Person: Phone Numbers: Home: Contact Person: Phone Numbers: Home: Contact Person: Phone Numbers: Address PCTC Requested Services: (Identify No. Needed) Electronic Set Tables Ovrhd. Proj. x Snacks Chalkboard Video Camera Breakfast Lectern Video Recorder Luncheon Coat Racks Internet Access Dinner For specific room setup, see attached design: (check one) Set of contact with Cafeteria/Culinary Arts Services if used for this event: Set of the sevent/activity. Part II - To be completed by PCTC Personnel: Estimate Calculation of Fees: Attach any pertinent papers. Rental Custodial 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 Action Taken Pate By Approved and Booked Billed for Services in a contact with the public through our publicly accessed calculatr. Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Business Name: Contact Person: Phone Number: Address: If specific hookup/utility needs are required see attached: (check one) Yos or No Estimated time of arrival at Pioneer for setup/delivery: Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Business Name: Contact Person: Phone Number: Address: If specific hookup/utility needs are required see attached: (check one) Yos or No Estimated time of arrival at Pioneer for setup/delivery: Phone Number: Address: If specific hookup/utility needs are required see attached: (check one) Yos or No Estimated time of arrival at Pioneer for setup/delivery: Phone of No Estimated time of arrival at Pioneer for setup/delivery: Phone of No Estimated time of arrival at Pioneer for setup/deliver				Se	tup Time	Tear Down	Date Request Submitted	
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Number of Persons Attending Meeting Address Contact Person: Tina Hurst, ext. 42200 Phone Numbers: Home: Cell: Contact Person: Work: Cell: Phone Numbers: Home: Contact Person: Tina Hurst, ext. 42200 Phone Numbers: Home: Cell: Contact Person: Phone Numbers: Home: Contact Person: Phone Numbers: Home: Contact Person: Phone Numbers: Home: Contact Person: Contact Person: Phone Number: Address: If specific hookup/utility needs are required see attached: (check one) Yes or No Estimated time of arrival at Pioneer for setup/delivery: Chairs Microphone Drinks x Tables Ovrhd. Proj. x Snacks Chalkboard Video Camera Breakfast Lectern Video Recorder Luncheon Coat Racks Internet Access Dinner For specific room setup, see attached design: (check one) Total Received by PCTC Personnel: Stimate Calculation of Fees: Attach any pertinent papers. Rental	· · · · · · -							
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Estimated time of arrival at Pioneer for setup/delivery: X Chairs					(check one) Yes or No			
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Chalkboard Video Camera Breakfast Lectern Video Recorder Luncheon Coat Racks Internet Access Dinner Date of contact with Cafeteria/Culinary Arts Services if used for this event: 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. Any and all information on this form may be shared with the public through our publicly accessed calendar. Date By Date By			x Snacks		Other/Sp	ecify:		
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Coat Racks			Lunche	on	cookie	s/coffee/water	- arrangements finalized	
Date of contact with Cafeteria/Culinary Arts Services if used for this event: Part II - To be completed by PCTC Personnel Responsibility Notice		Internet Access	Dinner					
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Custodial Services								
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these funds for the direct use, improvement, and maintenance of the building utilization areas of the school.