Building Utilization Request

Pioneer

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

raiti- 10 be completed by organization requesting building utilization							
Date(s) 9/14;10/12;11/9;12/14;1/11/23			Set I	Up Time	Tear Down Time	Date Request Submitted	
Activity: Day(s) 2/8;	ctivity: Day(s) 2/8;3/8 Wed				Time	August 30, 2022	
Event Time(s) 2:30-3:30 pm						Room(s) / Area Requested:	
Name of Organization and Event Being Held				Number o		Media Center	
Pioneer PD				Attending	Meeting		
				10-20			
Address Pioneer				Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)			
Contact Person: Shannon Sprang				Business Name:			
Phone Numbers: Home:				Contact Person:			
			Phone Number:				
				Address:			
PCTC Requested Services: (Identify No. Needed)				If specific hookup/utility needs are required see attached:			
<u>Café</u> OR				(checkYes orNo			
Room Setup Electr	onic	Culinary Art	<u>s</u>	Estimated time of arrival at Pioneer for setup/delivery:			
Chairs N	Microphone	Drinks					
Tables Ovrhd. Proj Snacks				Other/Specify:			
Chalkboard V	/ideo Camera	Breakfa:	st				
Lectern V	/ideo Recorder	Lunched	on				
Coat Racks Internet Access Dinner							
For specific room setup, see attached design: (check one)				Date of contact with Cafeteria/Culinary Arts Services			
Yes or <u>X</u> 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 \$0.00							
Custodial Services 0.00				equipine			
Food Services 0.00				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.			
Other							
Total Fee Estimate \$0.00							
Note: Final invoice billing based upon actual costs following the event/activity.					•		
Upon receipt of invoice, please make check payable to: Pioneer CTC				Any and all information on this form may be shared with the public through our publicly accessed calendar.			
Action Taken	Date	Ву		. , 1			
Approved and Booked	91.122	KK		VØ	ent		
Billed for Services			Signature (person in charge of activity)				
Referred to Board				Date:	1/31/22		