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: | reque | esting buildi | ng utilization | | |
|---|---------------|--|--|---------------------------|--|
| Date(s) 4/23/2025 | | Setup Time | | Date Request Submitted | |
| Activity: Day(s) Wednesday | | | Time | June 10, 2024 | |
| Event Time(s) 7:00-8:30 pm | | 7:00 | 9:00 | Room(s) / Area Requested: | |
| Name of Organization and Event Being Held | | | of Persons | ARENA | |
| Pioneer Honors Night - Set Up April 22nd pleas | | 7 | Attending Meeting | | |
| | | | 800 Services to be provided by outside person(s)/vendors | | |
| Address | | | (i.e. caterer, photographer, etc.) | | |
| Contact Person: Tina Hurst, ext. 42200 | Business | Business Name: | | | |
| Phone Numbers: Home: | | | Contact Person: | | |
| Work Cell: | | | Phone Number: | | |
| | Address | Address: | | | |
| PCTC Requested Services: (Identify No. Need | attached: | attached: | | | |
| <u>Café</u> OR | | onel | | | |
| Room Setup <u>Electronic</u> <u>Culina</u> | | | Estimated time of arrival at Pioneer for setup/deliver | | |
| Chairs <u>x</u> Microphone Drinks | | *Set Up | *Set Up on Tuesday, April 22-ready to go in AM | | |
| x Tables Ovrhd. Proj. Sn. | ` | | | | |
| Chalkboard Video Camera Breakfast | | st *set up | *set up all chairs with center aisle; hort will | | |
| x Lectern Video Recorder Luncheon | | on provide | provide plants for stage area - see diagram | | |
| x Coat Racks Internet Access Dir | for spe | for specific set up | | | |
| For specific room setup, see attached design: (chec | e) Date of o | Date of contact with Cafeteria/Culinary Arts Service | | | |
| x Yes or No | if used for | if used for this event | | | |
| Part II - To be completed by PCTC Person | | Responsibility Notice | | | |
| Estimate Calculation of Fees: Attach any perti | ape It is und | It is understood that our organization assumes | | | |
| Rental | | full responsibility for any damage to the building | | | |
| Custodial Services | and equ | and equipment. | | | |
| Food Services | A Secu | A Security Deposit in the amount of \$ is required to confirm scheduling. This will be | | | |
| Other | | | | | |
| Total Fee Estimate | | applied to final invoice upon satisfactory complete of event/activity. | | | |
| Note: Final invoice billing based upon actua | comple | te of event/ac | tivity. | | |
| following the event/activity. | _ Any an | d all informs | ntion on this form may be | | |
| Upon receipt of invoice, please make check to: | 10 | shared with the public through our publicly | | | |
| Pioneer CTC | | d calendar. | | | |
| Action Taken Date By | | | | | |
| Approved and Booked 6/20/24 | ·K | | | | |
| Billed for Services | | | Signature (pers | on in charge of activity) | |
| Referred to Board | | Date:_ | | | |

to use these funds for the direct use, improvement, and Thank you for selecting Pioneer for your event! maintenance of the building utilization areas of the school.

Catalona Stra XXXXX xxxxx XXXX +++ programs Alter 1 Entrance

Stage (rails down) Curtains pulled イメメイ x Flag Set up Ail メナメメメ Dodium aisle for color gi メイベメ メデナメメメメメ XFlag Set of eily 2 8th tables nest to Stairs $|\eta|$ 2 rows of presented Chairs-Locach XXXXXXXX XXXXXXXXXXX