

# 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) <b>10/15/2025</b>		Setup Time <b>7:00</b>	Tear Down Time <b>2:05</b>	Date Request Submitted <b>May 27, 2025</b>
Activity: Day(s) <b>Wednesday</b>				Room(s) / Area Requested: <b>Community Room</b>
Event Time(s) <b>7:30-2:00 pm</b>				
Name of Organization <b>Picture Retake Day</b>		Number of Persons Attending Meeting		
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: <b>Tina Hurst, ext. 42200</b>		Business Name: _____		
Phone Numbers: Home: _____		Contact Person: _____		
Work: _____ Cell: _____		Phone Number: _____		
PCTC Requested Services: (Identify No. Needed)		Address: _____		
<u>Room Setup</u>	<u>Electronic</u>	<u>Café/Culinary Arts</u>		
<b>4</b> Chairs	_____ Microphone	_____ Drinks		
<b>3</b> Tables	_____ Ovrhd. Proj.	_____ Snacks		
_____ Chalkboard	_____ Video Camera	_____ Luncheon		
_____ Lectern	_____ Video Recorder	_____ Dinner		
_____ Coat Racks	_____ Internet Access			
For specific room setup, see attached design: (check one)		attached: (check one) _____ Yes or _____ No		
<input checked="" type="checkbox"/> Yes or _____ No		Estimated time of arrival at Pioneer for setup/delivery <b>7:00</b>		
		Other/Specify: <b>One table/one chair</b>		
		<b>Cameras will need to plug in;</b>		
		Date of contact with Cafeteria/Culinary Arts Services if used for this event _____		

### Part II - To be completed by PCTC Personnel

Estimate Calculation of Fees: Attach any pertinent paper

Rental .....

Custodial Services .....

Food 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	Date	By
Approved and Booked	6/9/25	YWK
Billed for Services		
Referred to Board		

### 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.

Signature (person in charge of activity)

Date: \_\_\_\_\_

Thank you for selecting Pioneer for your event!

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