

# 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) <u>2/19/2026</u>	Setup Time 4:45 - 5:30	Tear Down Time 6:30 - 7:00	Date Request Submitted <u>January 21, 2026</u>
Activity: Day(s) <u>Thursday</u>			Room(s) / Area Requested:  <b>Community Room</b>
Event Time(s) <u>5:30 pm - 6:30 pm</u>			
Name of Organization and Event Being Held <b>Pioneer Preschool ABC &amp; 123 Family Bingo Night</b>	Number of Persons Attending Meeting <b>apprx 40</b>		
Address <b>Pioneer Career &amp; Technology Center 27 Ryan Rd. Shelby, OH 44875</b>	Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: <u>Juli Adair</u>	Business Name: _____		
Phone Numbers: Home: _____	Contact Person: _____		
Work: <u>742600</u> Cell: _____	Phone Number: _____		
Address: _____			
PCTC Requested Services: (Identify No. Needed)			
<u>Room Setup</u>	<u>Electronic</u>	<u>Café</u> OR <u>Culinary Arts</u>	
<input checked="" type="checkbox"/> Chairs	<input checked="" type="checkbox"/> Microphone	<input type="checkbox"/> Drinks	
<input checked="" type="checkbox"/> Tables	<input checked="" type="checkbox"/> Smart Board	<input type="checkbox"/> Snacks	
Chalkboard	<input type="checkbox"/> Video Camera	<input type="checkbox"/> Breakfast	
Lectern	<input type="checkbox"/> Video Recorder	<input type="checkbox"/> Luncheon	
Coat Racks	<input checked="" type="checkbox"/> Internet Access	<input type="checkbox"/> Dinner	
For specific room setup, see attached design: (check one)			
<input checked="" type="checkbox"/> Yes or <input type="checkbox"/> No			
Estimated time of arrival at Pioneer for setup/delivery: _____			
Other/Specify: _____ _____			
Date of contact with Cafeteria/Culinary Arts Services if used for this event: _____			
<b>Part II - To be completed by PCTC Personnel</b>			
Estimate Calculation of Fees: Attach any pertinent papers.			
Rental ..... _____			
Custodial Services ..... _____			
Food Services ..... _____			
Other ..... _____			
<b>Total Fee Estimate</b> _____			
Note: Final invoice billing based upon actual costs following the event/activity.			
Upon receipt of invoice, please make check payable to: <b>Pioneer CTC</b>			
<b>Action Taken</b>	<b>Date</b>	<b>By</b>	
Approved and Booked	<u>1/23/26</u>	<u>Juli A. Adair</u>	
Billed for Services		Signature (person in charge of activity)	
Referred to Board		Date: <u>1/21/26</u>	

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.

Thank you for selecting Pioneer for your event!

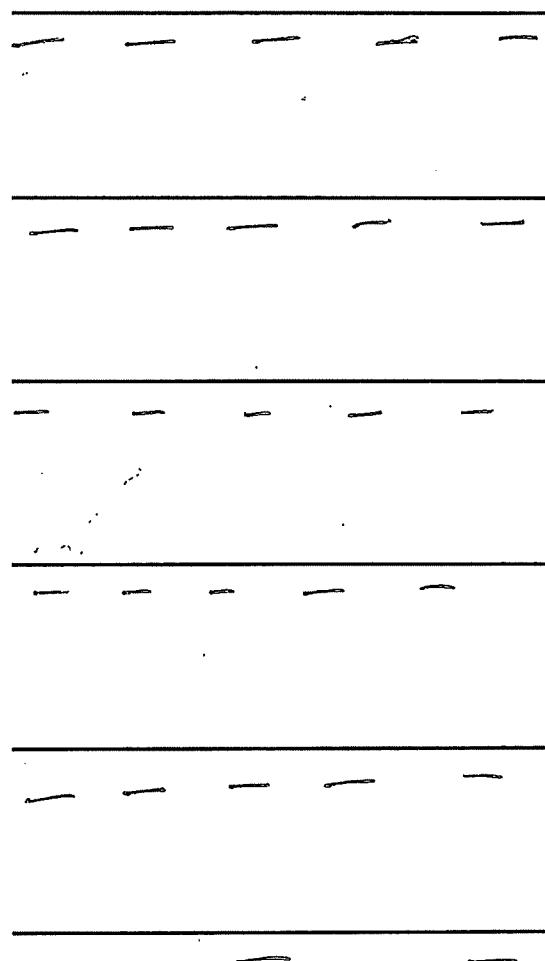
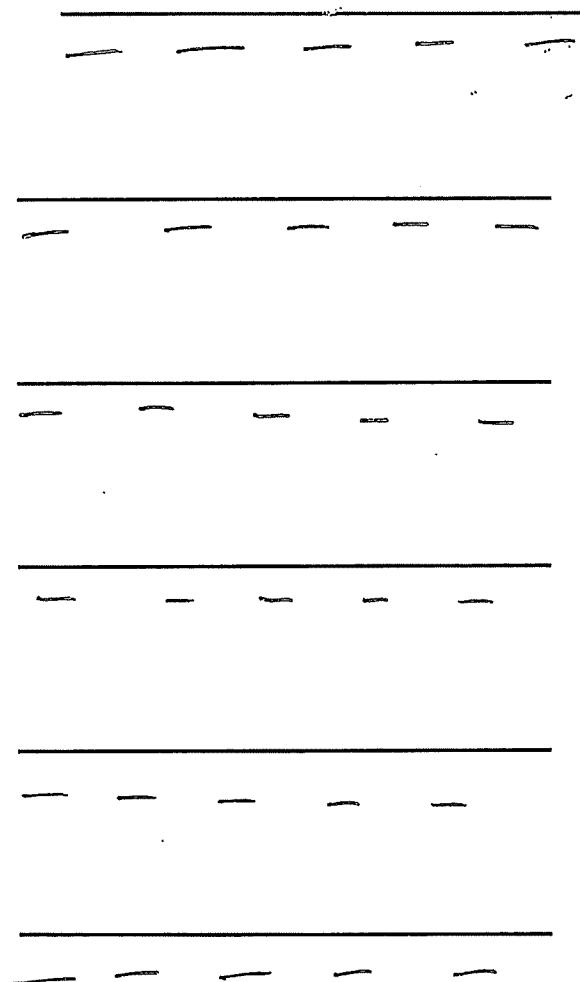
# ECE Parent Event – ABC & 123 Bingo

Smart board

Podium

Table set up

White Board



The tables & chairs  
that are in there are  
fine!