Building Utilization Request



Pioneer Career and Technology Center ATTN: Director of Business Affairs 27 Ryan Road, Shelby, OH 44875

Part I - To be complet	ted by organizati	on requestir	mo characht a-dealtano tachta	lization		
Date(s)	_	1	Setup Time	Tear Down	Date Request Submitted	
Activity: Day(s) 2-21-1019			Time	12-1)-1)		
Event Time(s)		30			Room(s) / Area Requested:	
Name of Organization a	eld		of Persons			
ACT pre, reg. Buckeye Contrad			Attending Attending	Attending Meeting		
Address	0	\ Services t	Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)			
Contact Person:	MM	Business N	Business Name:			
Phone Numbers: Home:			Contact Pe	Contact Person:		
Work: 42252 Cell:			Phone Nur	Phone Number:		
		Address:	Address:			
PCTC Requested Servic	eeded)	If specific	If specific hookup/utility needs are required see attached:			
<u>Café</u> OR			(check one	(check one) Yes or No		
Room Setup Electro	onic .	Culinary Art	s Estimated	Estimated time of arrival at Pioneer for setup/delivery:		
14 m	Aicrophone .	Drinks	ļ <u> </u>			
Tables Tables Ovrhd. Proj Snacks			Other/Spe	Other/Specify:		
ChalkboardV	ideo Camera	Breakfa	st			
Lectern V	ideo Recorder	Lunched	on			
Coat Racks Ir	nternet Access	Dinner				
For specific room setup, see attached design: (check one)			Date of co	Date of contact with Cafeteria/Culinary Arts Services		
Yes orNo			if used for	if used for this event:		
- Part II - To be comple	sonnel		Responsibility Notice			
Estimate Calculation of	ertinent paper	s. It is und	It is understood that our organization assumes full responsibility for any damage to the building and			
Rental		_				
Custodial Services		equipme	ent.			
Food Services		A Secur	A Security Deposit in the amount of \$			
Other			•	is required to confirm scheduling. This will be		
Total Fee Estimate			1	applied to final invoice upon satisfactory complete of event/activity.		
Note: Final invoice billing based upon actual costs			event/ac	tivity.		
following the event/activity.			Any and	i all information	on on this form may be	
Upon receipt of invoice, please make check payable to:			_	shared with the public through our publicly		
Pioneer CTC			accessed	accessed calendar.		
Action Taken	Date	Ву		≤ 2		
Approved and Booked	12/8/17	THE			Lymx'	
Billed for Services	, ,			Signature (pers	on in charge of activity)	
Referred to Board			Date:	10/		
It is the policy of Pioneer (Career & Technolo	ay Center to	uso Thank	vou for coloc	ting Pioneer for your event!	

these funds for the direct use, improvement, and maintenance of the building utilization areas of the school.