

# 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>9/1/2021</b>		Setup Time	Tear Down Time	Date Request Submitted <b>August 31, 2021</b>
Activity: Day(s) <b>1</b>				Room(s) / Area Requested: <b>Comm. Room</b>
Event Time(s) <b>1:00 PM</b>		Number of Persons Attending Meeting <b>15</b>		
Name of Organization and Event Being Held <b>Sp. Needs</b>		Address		
Contact Person: _____		Business Name: _____		
Phone Numbers: Home: _____		Contact Person: _____		
Work: _____ Cell: _____		Phone Number: _____		
PCTC Requested Services: (Identify No. Needed)		Address: _____		
<u>Café</u> OR <u>Culinary Arts</u> <u>Room Setup</u> <u>Electronic</u> <input checked="" type="checkbox"/> Chairs      _____ Microphone      _____ Drinks <input checked="" type="checkbox"/> Tables      _____ Ovrhd. Proj.      _____ Snacks _____ Chalkboard      _____ Video Camera      _____ Breakfast <input checked="" type="checkbox"/> Lectern      _____ Video Recorder      _____ Luncheon _____ Coat Racks      _____ Internet Access      _____ Dinner		If specific hookup/utility needs are required see attached: (check one) <u>Yes</u> or <u>No</u> Estimated time of arrival at Pioneer for setup/delivery: _____ Other/Specify: <u>please space out tables/chairs for social distancing</u> _____ _____		
For specific room setup, see attached design: (check one) <u>Yes</u> or <u>No</u>		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 papers. Rental ..... Custodial Services ..... Food Services ..... Other ..... <b>Total Fee Estimate</b> ..... <b>Note:</b> Final invoice billing based upon actual costs following the event/activity. Upon receipt of invoice, please make check payable to: <b>Pioneer CTC</b>			<h3>Responsibility Notice</h3> <p>It is understood that our organization assumes full responsibility for any damage to the building and equipment.</p> <p>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.</p> <p><b>Any and all information on this form may be shared with the public through our publicly accessed calendar.</b></p>	
<b>Action Taken</b>	<b>Date</b>	<b>By</b>	Signature (person in charge of activity) _____ Date: <u>8/31/21</u>	
Approved and Booked	<u>8/31/21</u>	<u>K/C</u>		
Billed for Services				
Referred to Board				

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!**

Revised 07/15