Building Utilization Request



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

Date (s) 3/5/2024 Activity: Day(s) Tuesday Event Time(s) Number of Persons Attending Meeting S0-60 Address Pioneer So-60 Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) So-60 Summer of Persons Attending Meeting S0-60 Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Some some content of the provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Some some content of the provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Some some content of the provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Some some content of the provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Some some content of the provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Some some content of the provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Some some content of the provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Some some content of the provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Some some content of the provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Some some content of the provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Some some content of caterial Persons Some some content of caterial Persons Some some content of some some content of caterial Persons Some some co	Part I - To be completed by organization requesting building utilization							
Name of Organization and Event Being Held Number of Persons Attending Meeting S0-60 Arena	Date(s) 3/5/2024				3/4		Date Request Submitted	
Name of Organization and Event Being Held NTHS	Activity: Day(s) Tuesday					Time	February 2, 2024	
Attending Meeting 50-60 Address Pioneer Contact Person: Vickie Hunt/Emma Jenkins Business Name: Contact Person: Contact Person: Contact Person: Home: Contact Person: Contact							Room(s) / Area Requested:	
Address Pioneer Contact Person: Vickie Hunt/Emma Jenkins Phone Numbers: Home: Cell: Contact Person: Contact Person: Contact Person: Work: Cell: Contact Person: Contact Perso	Name of Organization and Event Being Held						Arena	
Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)	NTHS			1				
Contact Person: Vickie Hunt/Emma Jenkins Phone Numbers: Home: Contact Person: Contact Person: Phone Numbers: Home: Contact Person: Phone Number: Address: Person: Café OR Room Setup Electronic Café OR Tables Ovrhd. Proj. x Snacks Chalkboard Video Camera Breakfast X Lectern Video Recorder Luncheon Coat Racks Internet Access Dinner For specific room setup, see attached design: (check one) Yes or X No Part II - To be completed by PCTC Personnel Estimate Calculation of Fees: Attach any pertinent papers Rental So.00 Custodial Services 0.000 Custodial Services 0.000 Custodial Services 0.000 Other Strip Final invoice billing based upon actual costs following the event/activity. Upon receipt of invoice, please make check payable to: Ploneer CTC Action Taken Date By Approved and Booked 2/5/14 Kr. C Signature (person in charge of activity)				. (
Contact Person: Vickle Hunt/Emma Jenkins Phone Numbers: Home:	Address Pioneer							
Phone Numbers: Home: Cell: Phone Number: Address: Addr								
Phone Number: Address: Address: February Arts Address:	,			- 1				
Address: PCTC Requested Services: (Identify No. Needed) Café OR								
PCTC Requested Services: (Identify No. Needed) Café OR	Work: Cell:							
Café OR Culinary Arts Electronic X Microphone Drinks								
Room Setup Electronic Culinary Arts Estimated time of arrival at Pioneer for setup/delivery: x Chairs x Microphone Drinks Tables Ovrhd. Proj. x Snacks Other/Specify: Chalkboard Video Camera Breakfast X Lectern Video Recorder Luncheon Coat Racks Internet Access Dinner For specific room setup, see attached design: (check one) Yes or X No Date of contact with Cafeteria/Culinary Arts Services if used for this event: To be completed by PCTC Personnel 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. Upon receipt of invoice, please make check payable to: Ploneer CTC Action Taken Date By Approved and Booked 2/5/24 Mr C Signature (person in charge of activity) Signature (person in charge of activity)								
X Chairs X Microphone Drinks Tables								
Tables Ovrhd. Proj. x Snacks Chalkboard Video Camera Breakfast x Lectern Video Recorder Luncheon Coat Racks Internet Access Dinner For specific room setup, see attached design: (check one) Yes or X No Part II - To be completed by PCTC Personnel Estimate Calculation of Fees: Attach any pertinent papers Rental So.00 Custodial Services Other Total Fee Estimate 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 2/5/vy Mark Billed for Services Other Soracks Dinner Date of contact with Cafeteria/Culinary Arts Services if used for this event: 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. Any and all information on this form may be shared with the public through our publicly accessed calendar. A Signature (person in charge of activity)								
Chalkboard Video Camera Breakfast					Other/Spe	ecify:		
Lectern								
Coat Racks Internet Access Dinner								
For specific room setup, see attached design: (check one) Yes or X No Part II - To be completed by PCTC Personnel Estimate Calculation of Fees: Attach any pertinent papers Rental \$0.00 Custodial Services \$0.00 Food Services \$0.00 Other \$100 Total Fee Estimate \$0.00 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 \$2.55/\(\frac{1}{2}\fra		-					-	
To be completed by PCTC Personnel Responsibility Notice					Date of contact with Cafeteria/Culinary Arts Services			
Estimate Calculation of Fees: Attach any pertinent papers Rental								
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Other					A Secur	rity Denosit in	the amount of \$	
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Billed for Services Signature (person in charge of activity)			······				V Hunt	
Billed for Services		215/24	[m]C					
	Billed for Services Referred to Board						on in charge of activity)	

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!

Wooden Stake Boxes
Whooden Stake Boxes
Whooden Stake Boxes Table Refreshment 75 chairs Side Table for awards and gifts **ARENA STAGE** Walkway Candle Table 75 chairs Podium Supering Chair discording Chair Chai