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) March 1, 2016		Setup Time	Tear Down	Date Request Submitted		
Activity: Day(s) Tuesday				Time	October 13, 2015	
Event Time(s	s) 11:00 am to 12	2:30 pm			Room(s) / Area Requested:	
Name of Organization				of Persons	Pioneer Room	
Pioneer Alumni Association Meeting			Attending	Attending Meeting 15		
			Services	Services to be provided by outside person(s)/vendors		
Address				(i.e. caterer, photographer, etc.)		
Contact Person: Karen Donahue				Business Name:		
			_	Contact Person:		
 !			— I	Phone Number:		
Work: <u>ext 42100</u> Cell:			_	Address:		
DCTC Paguacted Servi	adad)		If specific hookup/utility needs are required see attached:			
PCTC Requested Services: (Identify No. Needed) Room Setup Electronic Café or Culinary Arts			_	(check one) Yes or No		
x Chairs Microphone (circle one)				Estimated time of arrival at Pioneer for setup/delivery:		
	- Wherephone			Estimated time of arrival at Ploneer for setup/derivery:		
	Video Camera	Snacks	Other/Spe	oifu: uco of F	Pioneer Boom engage only	
	Video Camera Video Recorder	Lunched	1	Other/Specify: use of Pioneer Room space only will be getting lunch from Cafeteria salad bar		
<u> </u>	Internet Access	— Dinner		or from outside vendor if no salad bar		
			·	Date of contact with Cafeteria/Culinary Arts Services		
For specific room setup, see attached design: (check one) Yes or No				if used for this event:		
				Responsibility Notices		
PartII To be completed by PCTC Personnel Estimate Calculation of Fees: Attach any pertinent papers.						
	tinent papers		It is understood that our organization assumes full responsibility for any damage to the building and equipment. A Security Deposit in the amount of \$\frac{1}{2}\$ is required to confirm scheduling. This will be applied to final invoice upon satisfactory complete of event/activity.			
Rental		_				
Custodial Services		A C				
Food Services						
Other Total		_				
Note: Final invoice bil	al costs	event/ac				
following the event/activity.						
Upon receipt of invoice, please make check payable to:			-	Any and all information on this form may be		
P	1 7	Sharea	shared with the public through our publicly accessed calendar.			
Action Taken	Date	Ву		1/0 -	Ton all	
Approved and Booked	10/13/2015	MB	arn_	KURI	Medul	
Billed for Services	, ,			Signature (pers	son in charge of activity)	
Referred to Board			Date:			

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