

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) 11-Nov-15		Setup Time	Tear Down Time	Date Request Submitted
Activity: Day(s) Wednesday				October 20, 2015
Event Time(s) 10:30 - 1:00				Room(s) / Area Requested: community ROOM
Name of Organization and Event Being Held Cosmetology/Springfield Fire department		Number of Persons Attending Meeting 20 PER CLASS		
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: Darlene Daugherty		Business Name: _____		
Phone Numbers: Home: _____		Contact Person: _____		
Work: _____ Cell: _____		Phone Number: _____		
Address: _____		Address: _____		
PCTC Requested Services: (Identify No. Needed)		If specific hookup/utility needs are required see attached: (check one) <u>Yes</u> or <u>No</u>		
<u>Café</u> OR <u>Culinary Arts</u>		Estimated time of arrival at Pioneer for setup/delivery: _____		
<u>Room Setup</u>	<u>Electronic</u>	Other/Specify: _____		
<u>20</u> Chairs	<u>Microphone</u>	_____		
<u>1</u> Tables	<u>Ovrhd. Proj.</u>	_____		
<u>Chalkboard</u>	<u>Video Camera</u>	_____		
<u>Lectern</u>	<u>Video Recorder</u>	_____		
<u>Coat Racks</u>	<u>Internet Access</u>	_____		
<u>Drinks</u>	<u>Snacks</u>	Date of contact with Cafeteria/Culinary Arts Services if used for this event: _____		
<u>Breakfast</u>	<u>Luncheon</u>			
<u>Dinner</u>				
For specific room setup, see attached design: (check one)				
<u>Yes</u> or <u>No</u>				

Part II - To be completed by PCTC Personnel

<p>Estimate Calculation of Fees: Attach any pertinent papers.</p> <p>Rental _____</p> <p>Custodial Services _____</p> <p>Food Services _____</p> <p>Other _____</p> <p>Total Fee Estimate _____</p> <p>Note: Final invoice billing based upon actual costs following the event/activity.</p> <p>Upon receipt of invoice, please make check payable to: Pioneer CTC</p>			<p>Responsibility Notice</p> <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>Any and all information on this form may be shared with the public through our publicly accessed calendar.</p>		
Action Taken	Date	By	Signature (person in charge of activity)		
Approved and Booked	10/21/15	WYB	_____		
Billed for Services			Date: _____		
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!