

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) 10/11/23; 3/6/24 & 4/17/2024		Setup Time	Tear Down Time	Date Request Submitted
Activity: Day(s) Wednesdays				July 26, 2023
Event Time(s) 7:30 am - 11 am		7:00 AM	11:30 AM	Room(s) / Area Requested:
Name of Organization and Event Being Held Business Advisory Council Meetings 2023-24		Number of Persons Attending Meeting 35-45		Arena
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: Becki Kimmel		Business Name: _____		
Phone Numbers: Home: _____		Contact Person: _____		
Work: ext. 42101 Cell: _____		Phone Number: _____		
PCTC Requested Services: (Identify No. Needed) <i>tablecloth & tables</i> — <input checked="" type="checkbox"/> Café OR <input type="checkbox"/> Culinary Arts		Address: _____		
Room Setup <input checked="" type="checkbox"/> Chairs <input type="checkbox"/> Microphone <input type="checkbox"/> Drinks		If specific hookup/utility needs are required see attached: (check one) <input type="checkbox"/> Yes or <input type="checkbox"/> No		
<input checked="" type="checkbox"/> Tables <input type="checkbox"/> Ovrhd. Proj. <input type="checkbox"/> Snacks		Estimated time of arrival at Pioneer for setup/delivery: _____		
<input type="checkbox"/> Chalkboard <input type="checkbox"/> Video Camera <input checked="" type="checkbox"/> Breakfast		Other/Specify: _____		
<input type="checkbox"/> Lectern <input type="checkbox"/> Video Recorder <input type="checkbox"/> Luncheon		_____		
<input type="checkbox"/> Coat Racks <input type="checkbox"/> Internet Access <input type="checkbox"/> Dinner		_____		
For specific room setup, see attached design: (check one) <input checked="" type="checkbox"/> Yes or <input type="checkbox"/> No <i>suback for details</i>		Date of contact with Cafeteria/Culinary Arts Services if used for this event: July 26, 2023		

Part II - To be completed by PCTC Personnel

Responsibility Notice

Estimate Calculation of Fees: Attach any pertinent papers.			<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>	
Rental				
Custodial Services				
Food Services				
Other				
Total Fee Estimate _____			<p>Any and all information on this form may be shared with the public through our publicly accessed calendar.</p> <p><i>Becki Kimmel</i> Signature (person in charge of activity)</p> <p>Date: 7/26/2023</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>				
Action Taken	Date	By		
Approved and Booked	7/31/23	<i>[Signature]</i>		
Billed for Services				
Referred to Board				

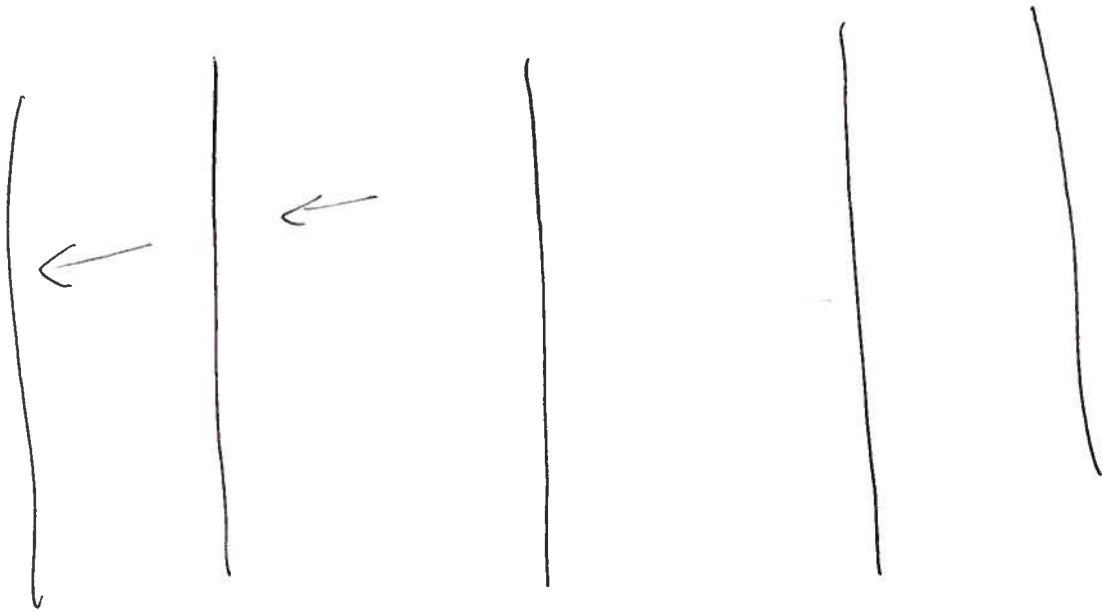
It is the policy of Pioneer Career & Technology Center to use these funds for the direct use, improvement, and maintenance of the building utilization areas of the school.

Thank you for selecting Pioneer for your event!

Revised 07/15

Stage

← podium



Set up for SD All
tablecloths on tables

check in
small table

tablecloths
Food table

table
for
coffee