

OC

# 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>1/28/2016</b>	Setup Time	Tear Down Time	Date Request Submitted <b>June 10, 2015</b>
Activity: Day(s) <b>Thursday</b>			Room(s) / Area Requested: <b>Cafeteria</b>
Event Time(s) <b>6:00-8:00 pm</b>			
Name of Organization <b>Reception Area for Soph. Open House</b>		Number of Persons Attending Meeting	
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)	
Contact Person: _____		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>Room Setup</u>	<u>Electronic</u>	<u>Café/Culinary Arts</u>	
<input type="checkbox"/> Chairs	<input type="checkbox"/> Microphone	<input type="checkbox"/> Drinks	
<input type="checkbox"/> Tables	<input type="checkbox"/> Ovrhd. Proj.	<input type="checkbox"/> Snacks	
<input type="checkbox"/> Chalkboard	<input type="checkbox"/> Video Camera	<input type="checkbox"/> Luncheon	
<input type="checkbox"/> Lectern	<input type="checkbox"/> Video Recorder	<input type="checkbox"/> Dinner	
<input type="checkbox"/> Coat Racks	<input type="checkbox"/> Internet Access		
For specific room setup, see attached design: (check one) <u>Yes</u> or <u>No</u>		Estimated time of arrival at Pioneer for setup/delivery: _____	
		Other/Specify: <b>*round tables; cookies/coffee/ water arrangements with J. Fortman</b>	
		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><i>[Signature]</i> Signature (person in charge of activity)</p> <p>Date: <u>6/10/15</u></p>
<b>Action Taken</b>	<b>Date</b>	<b>By</b>	
Approved and Booked	6/11/15	[Signature]	
Billed for Services			
Referred to Board			

**Thank you for selecting Pioneer for your event!**

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.