Building Utilization Request



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



ng building utilization	
p Time Tear Down Date	Request Submitted
Time	May 17, 2022
Room	n(s) / Area Requested:
Number of Persons	Cafeteria
Attending Meeting	
40	
Services to be provided by outside	
Business Name	
Contact Person	
Phone Number:	
Address:	
(CHECK Ves or	No
mai	•
Other/Specify	
-	
Date of contact with Cafeter	ia/Culinary Arts Services
if used for this even	
Responsibilit	y Notice
oa It is understood that our organization assumes	
full responsibility for any damage to the	
building and equipment.	
A Security Deposit in the a	mount o: \$
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
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accessed calendar.	
accessed calendar.	
Signature (person in cl	harge of activity)
tu i i i i i i i i i i i i i i i i i i i	Number of Persons Attending Meeting 40 Services to be provided by operson(s)/vendors Business Name Contact Person Phone Number: Address: attached: (CHECK ORE) Testimated time of arrival at Other/Specify Date of contact with Cafeter if used for this even Responsibility It is understood that our orgular responsibility for any obuilding and equipment. A Security Deposit in the a is required to confirm sche applied to final invoice upon complete of event/activity.

to use these funds for the direct use, improvement, and maintenance of the building utilization areas of