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 requesti | ng building u | tilization | 4.7 m | |
|---|---|---|----------------------------|--|
| Date(s) 3/14/2023-5/12/2023 | 9:30 AM | Tear Down | Date Request Submitted | |
| Activity: Day(s) all day | | Time | March 13, 2023 | |
| Event Time(s) all day | | 2:00 | Room(s) / Area Requested: | |
| Name of Organization and Event Being Held | 1 | of Persons | W166 | |
| Passport assembly/storage | Attending | Attending Meeting | | |
| | | | | |
| Address | | Services to be provided by outside person(s)/vendors | | |
| | | (i.e. caterer, photographer, etc.) | | |
| Contact Person: Tina Hurst | | Business Name: | | |
| Phone Numbers: Home: | Contact Pe | Contact Person: | | |
| Work: Cell: | Phone Nu | Phone Number: | | |
| | | Address: | | |
| PCTC Requested Services: (Identify No. Needed) | | If specific hookup/utility needs are required see attached: | | |
| <u>Café</u> OR | (check one | (check one)Yes orNo | | |
| Room Setup Electronic Culinary Art | Estimated | Estimated time of arrival at Pioneer for setup/delivery: | | |
| Chairs Microphone Drinks | | | | |
| TablesOvrhd. ProjSnacks | Other/Sp | Other/Specify: I need the room cleared out as much | | |
| Chalkboard Video Camera Breakfas | st as poss | as possible and several 6-8 ft. tables around | | |
| Lectern Video Recorder Lunched | on the per | the perimiter of the room, please. A couple of | | |
| Coat Racks Internet Access Dinner | chairs, | chairs, as well. Thanks! | | |
| For specific room setup, see attached design: (check one) | Date of c | Date of contact with Cafeteria/Culinary Arts Services | | |
| 1 | | if used for this event: | | |
| Part II - To be completed by PCTC Personnel Responsibility Notice | | | | |
| Estimate Calculation of Fees: Attach any pertinent papers. It is understood that our organization assum | | | | |
| Rental | | responsibility for any damage to the building and | | |
| Custodial Services | equipme | equipment. | | |
| | | rity Donocit in | the amount of \$ | |
| Food Services | | A Security Deposit in the amount of \$is required to confirm scheduling. This will be | | |
| Other | | applied to final invoice upon satisfactory complete of | | |
| Total Fee Estimate | | event/activity. | | |
| Note: Final invoice billing based upon actual costs following the event/activity. | | | | |
| | | Any and all information on this form may be | | |
| Upon receipt of invoice, please make check payable Pioneer CTC | | shared with the public through our publicly accessed calendar. | | |
| | accesse | d calendar. | 10:31 | |
| Action Taken Date By | *************************************** | | Max / West | |
| Approved and Booked 3/14/23 KWK | | Signature (rer | son in charge of activity) | |
| Billed for Services | Date: | Signature (person in charge of activity) | | |
| Referred to Board | Date. | <u> </u> | ya, | |

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