

# 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>18-May-23</b>	Setup Time	Tear Down Time	Date Request Submitted
Activity: Day(s) <b>Thursday</b>			<b>April 24, 2023</b>
Event Time(s) <b>530 pm - 7 pm</b>	<b>2:30 PM</b>	<b>7:30 PM</b>	Room(s) / Area Requested:
Name of Organization <b>ECE-End of year celebration-LUAAU theme</b>	Number of Persons Attending Meeting <b>100</b>		<b>ECE playground OR Cafeteria (depending on weather)</b>
Address	Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: <b>Ellen Zaebst</b>	Business Name: _____		
Phone Numbers: Home: _____	Contact Person: _____		
Work: <b>ext 42600</b> Cell: _____	Phone Number: _____		
PCTC Requested Services: (Identify No. Needed)	Address: _____		
<u>Room Setup</u> <u>Electronic</u> <u>Café/Culinary Arts</u>	If specific hookup/utility needs are required see attached: (check one) <u>Yes</u> or <u>No</u>		
<input type="checkbox"/> Chairs <input type="checkbox"/> Microphone <input type="checkbox"/> Drinks	Estimated time of arrival at Pioneer for setup/delivery: _____		
<input checked="" type="checkbox"/> Tables <input type="checkbox"/> Ovrhd. Proj. <input type="checkbox"/> Snacks	Other/Specify: _____		
<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	Date of contact with Cafeteria/Culinary Arts Services if used for this event: _____		
For specific room setup, see attached design: (check one)			
<input checked="" type="checkbox"/> Yes or <input type="checkbox"/> No			

## Part II - To be completed by PCTC Personnel

## Responsibility Notice

Estimate Calculation of Fees: Attach any pertinent papers.

Rental ..... \_\_\_\_\_

Custodial Services ..... \_\_\_\_\_

Food Services ..... \_\_\_\_\_

Other ..... \_\_\_\_\_

**Total Fee Estimate** \_\_\_\_\_

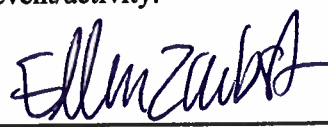
**Note:** Final invoice billing based upon actual costs following the event/activity.

Upon receipt of invoice, please make check payable to:  
**Pioneer CTC**

Action Taken	Date	By
Approved and Booked	4/24/23	KWIC
Billed for Services		
Referred to Board		

It is understood that our organization assumes full responsibility for any damage to the building and equipment.

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.



Signature (person in charge of activity)

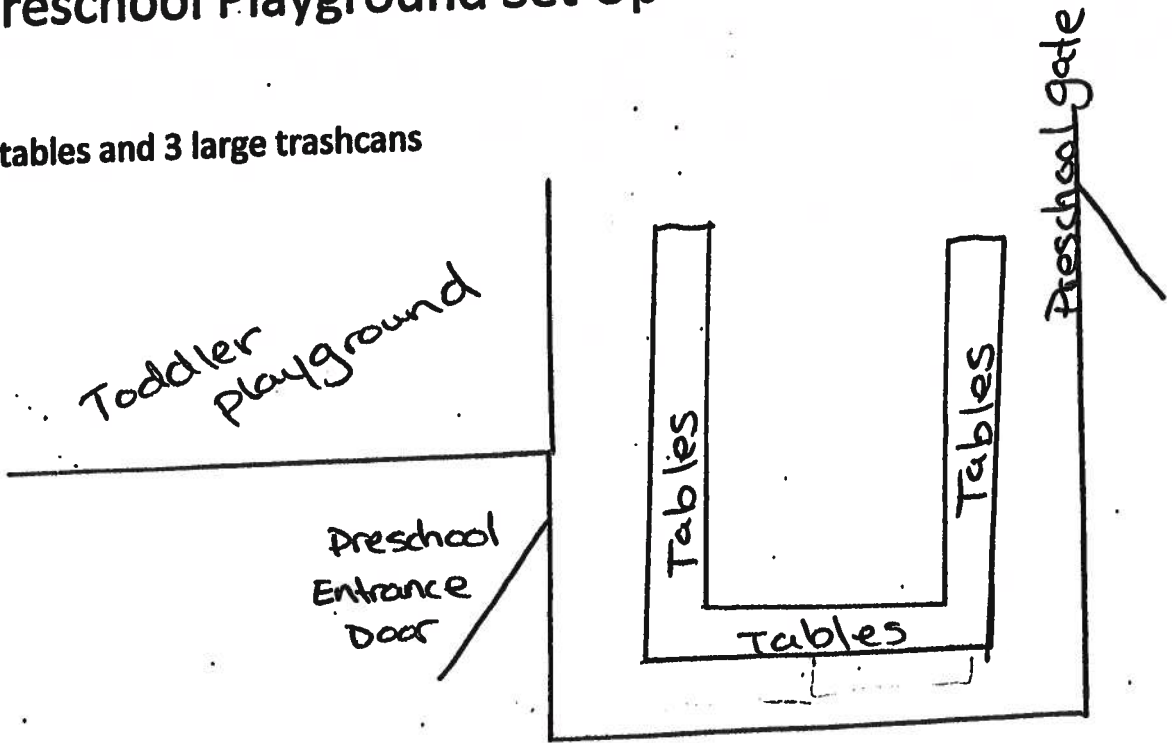
Date: 4/24/23

**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.

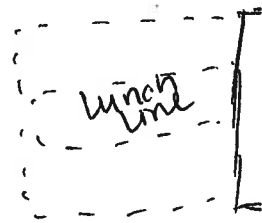
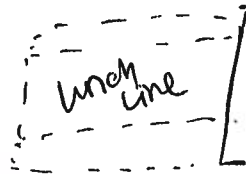
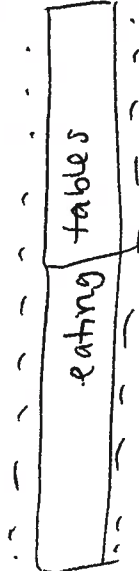
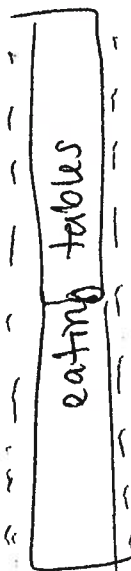
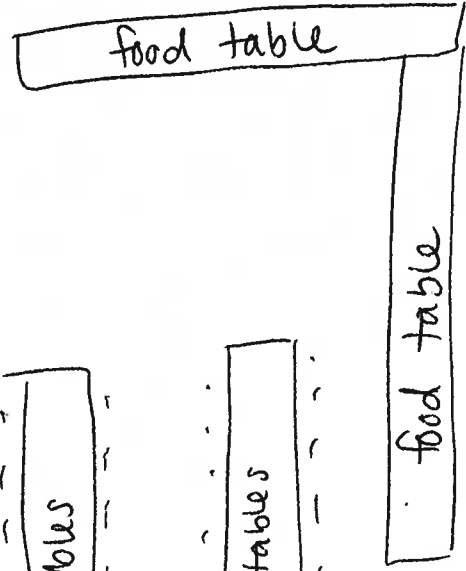
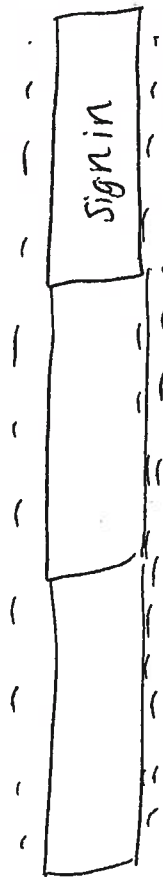
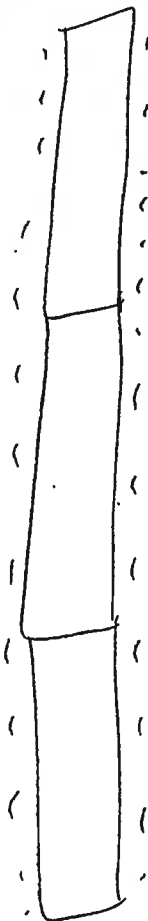
# Preschool Playground Set Up

9 tables and 3 large trashcans



DOORS

extra tables & chairs  
on the sides



extra tables & chairs on

door