

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) <u>9/6/2023</u>		Set Up Time	Tear Down Time	Date Request Submitted															
Activity: Day(s) <u>Wednesday</u>				<u>August 16, 2023</u>															
Event Time(s) <u>9 am - 11 am</u>		<u>8:00 AM</u>	<u>12:00 PM</u>	Room(s) / Area Requested:															
Name of Organization and Event Being Held Opening Career Coach Meeting		Number of Persons Attending Meeting 15 adults		Community Room															
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)																	
Contact Person: <u>Matt Parr</u>		Business Name: <u>Pioneer</u>																	
Phone Numbers: Home: _____		Contact Person: _____																	
Work: _____ Cell: _____		Phone Number: _____																	
PCTC Requested Services: (Identify No. Needed)		Address: _____																	
<table border="0"> <tr> <td><u>16</u> Chairs</td> <td><u>8</u> Tables</td> <td><u> </u> Chalkboard</td> <td><u> </u> Lectern</td> <td><u> </u> Coat Racks</td> </tr> <tr> <td><u> </u> Microphone</td> <td><u> </u> Ovrhd. Proj.</td> <td><u> </u> Video Camera</td> <td><u> </u> Video Recorder</td> <td><u> </u> Internet Access</td> </tr> <tr> <td><u> </u> Drinks</td> <td><u> </u> Snacks</td> <td><u> </u> Breakfast</td> <td><u> </u> Luncheon</td> <td><u> </u> Dinner</td> </tr> </table>		<u>16</u> Chairs	<u>8</u> Tables	<u> </u> Chalkboard	<u> </u> Lectern	<u> </u> Coat Racks	<u> </u> Microphone	<u> </u> Ovrhd. Proj.	<u> </u> Video Camera	<u> </u> Video Recorder	<u> </u> Internet Access	<u> </u> Drinks	<u> </u> Snacks	<u> </u> Breakfast	<u> </u> Luncheon	<u> </u> Dinner	If specific hookup/utility needs are required see attached: (check <u> </u> Yes or <u> </u> No) Estimated time of arrival at Pioneer for setup/delivery: _____ Other/Specify: _____ _____ _____ Date of contact with Cafeteria/Culinary Arts Services if used for this event: <u>N/A</u>		
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For specific room setup, see attached design: (check one) <u> </u> Yes or <u>X</u> No																			
Part II - To be completed by PCTC Personnel		Responsibility Notice																	
Estimate Calculation of Fees: Attach any pertinent papers Rental \$0.00 Custodial Services 0.00 Food Services 0.00 Other _____ Total Fee Estimate \$0.00		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.																	
Note: Final invoice billing based upon actual costs following the event/activity. Upon receipt of invoice, please make check payable to: Pioneer CTC		Any and all information on this form may be shared with the public through our publicly accessed calendar.																	
Action Taken	Date	By																	
<u>ATC</u>	<u>8/17/23</u>	<u>[Signature]</u>																	
				Signature (person in charge of activity) Date: <u>8-16-23</u>															

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

Thank you for selecting Pioneer for your event!