

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>9/21, 9/28, 10/5, 10/12, 10/19, 10/26, 2016</u> Activity: Day(s) <u>WEDNESDAYS</u> Time(s) <u>6-9 PM</u>	Date Request Submitted <p style="text-align: center;">September 15, 2016</p>																		
Name of Organization ADULT EDUCATION QUILTING CLASS	Number of Persons Attending Meeting <p style="text-align: center;">EIGHT</p>																		
Address	Room(s) / Area Requested: <p style="text-align: center;">COMMUNITY ROOM (C109)</p>																		
Contact Person: <u>MARTIN DZUGAN</u> Phone Numbers: Home: _____ Work: _____ Cell: _____	Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.) Business Name: _____ Contact Person: _____ Phone Number: _____ Address: _____ If specific hookup/utility needs are required see attached: (check one) <u>Yes</u> or <u>No</u> Estimated time of arrival at Pioneer for setup/delivery: _____ Other/Specify: _____ Date of contact with Cafeteria/Culinary Arts Services if used for this event: _____																		
PCTC Requested Services: (Identify No. Needed) <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black;"><u>Room Setup</u></td> <td style="border-bottom: 1px solid black;"><u>Electronic</u></td> <td style="border-bottom: 1px solid black;"><u>Café/Culinary Arts</u></td> </tr> <tr> <td><input checked="" type="checkbox"/> Chairs</td> <td><input type="checkbox"/> Microphone</td> <td><input type="checkbox"/> Drinks</td> </tr> <tr> <td><input checked="" type="checkbox"/> Tables</td> <td><input checked="" type="checkbox"/> Ovrhd. Proj.</td> <td><input type="checkbox"/> Snacks</td> </tr> <tr> <td><input checked="" type="checkbox"/> Chalkboard</td> <td><input type="checkbox"/> Video Camera</td> <td><input type="checkbox"/> Luncheon</td> </tr> <tr> <td><input type="checkbox"/> Lectern</td> <td><input type="checkbox"/> Video Recorder</td> <td><input type="checkbox"/> Dinner</td> </tr> <tr> <td><input type="checkbox"/> Coat Racks</td> <td><input checked="" type="checkbox"/> Internet Access</td> <td></td> </tr> </table> For specific room setup, see attached design: (check one) <input type="checkbox"/> Yes or <input type="checkbox"/> No	<u>Room Setup</u>	<u>Electronic</u>	<u>Café/Culinary Arts</u>	<input checked="" type="checkbox"/> Chairs	<input type="checkbox"/> Microphone	<input type="checkbox"/> Drinks	<input checked="" type="checkbox"/> Tables	<input checked="" type="checkbox"/> Ovrhd. Proj.	<input type="checkbox"/> Snacks	<input checked="" 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 checked="" type="checkbox"/> Internet Access		
<u>Room Setup</u>	<u>Electronic</u>	<u>Café/Culinary Arts</u>																	
<input checked="" type="checkbox"/> Chairs	<input type="checkbox"/> Microphone	<input type="checkbox"/> Drinks																	
<input checked="" type="checkbox"/> Tables	<input checked="" type="checkbox"/> Ovrhd. Proj.	<input type="checkbox"/> Snacks																	
<input checked="" 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 checked="" type="checkbox"/> Internet Access																		

Part II - To be completed by PCTC Personnel

Estimate Calculation of Fees: Attach any pertinent papers. Rental Custodial Services Food Services Other <p style="text-align: center;">Total Fee Estimate _____</p> Note: Final invoice billing based upon actual costs following the event/activity. Upon receipt of invoice, please make check payable to: <p style="text-align: center;">Pioneer CTC</p>	<p style="text-align: center;">Responsibility Notice</p> 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. <div style="text-align: center;"> Signature (person in charge of activity) </div> Date: <u>September 15, 2016</u>												
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">Action Taken</th> <th style="width:30%;">Date</th> <th style="width:40%;">By</th> </tr> </thead> <tbody> <tr> <td>Approved and Booked</td> <td style="text-align: center;"><u>9/16/16</u></td> <td style="text-align: center;"><u>[Signature]</u></td> </tr> <tr> <td>Billed for Services</td> <td></td> <td></td> </tr> <tr> <td>Referred to Board</td> <td></td> <td></td> </tr> </tbody> </table>	Action Taken	Date	By	Approved and Booked	<u>9/16/16</u>	<u>[Signature]</u>	Billed for Services			Referred to Board			<p style="text-align: center;">Thank you for selecting Pioneer for your event!</p>
Action Taken	Date	By											
Approved and Booked	<u>9/16/16</u>	<u>[Signature]</u>											
Billed for Services													
Referred to Board													