

Building Utilization Request



Pioneer Career and Technology Center

ATTN: Director of Business Affairs
27 Ryan Road, Shelby, OH 44875

VJL

Part I - To be completed by organization requesting building utilization

Date(s) 10/18/2016		Setup Time	Tear Down Time	Date Request Submitted September 27, 2016
Activity: Day(s) Tuesday				Room(s) / Area Requested: Cafeteria
Event Time(s) 6:00 PM				
Name of Organization Student Services College Credit Plus meeting		Number of Persons Attending Meeting 90		
Address PCTC		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: Crystal Escalera		Business Name: _____		
Phone Numbers: Home: 567 224-0700		Contact Person: _____		
Work: 419 347-7744 Cell: _____		Phone Number: _____		
PCTC Requested Services: (Identify No. Needed)		Address: _____		
Room Setup	Electronic	Café/Culinary Arts		
90 Chairs	1 Microphone	Drinks		
Tables	Ovrhd. Proj.	Snacks		
Chalkboard	Video Camera	Luncheon		
Lectern	Video Recorder	Dinner		
Coat Racks	Internet Access			
For specific room setup, see attached design: (check one)		If specific hookup/utility needs are required see attached: (check one) <u> </u> Yes or <u> </u> X No		
<u> </u> Yes or <u> </u> X 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: _____		

Part II - To be completed by PCTC Personnel

<p>Estimate Calculation of Fees: Attach any pertinent papers.</p> <p>Rental _____</p> <p>Custodial Services _____</p> <p>Food Services _____</p> <p>Other _____</p> <p>Total Fee Estimate _____</p> <p>Note: Final invoice billing based upon actual costs following the event/activity.</p> <p>Upon receipt of invoice, please make check payable to: Pioneer CTC</p>			<p align="center">Responsibility Notice</p> <p>It is understood that our organization assumes full responsibility for any damage to the building and equipment.</p> <p>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.</p> <p>Signature (person in charge of activity) _____</p> <p>Date: <u>Crystal Escalera</u> 9-27-16</p>		
Action Taken	Date	By			
Approved and Booked	<u>10/3/2016</u>	<u>[Signature]</u>			
Billed for Services					
Referred to Board					

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.