

# 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>12-Oct-18</u>	Setup Time	Tear Down Time	Date Request Submitted
Activity: Day(s) <u>Wed 7:30-9:30 AM</u>	<u>7:30</u> 8:00 AM	<u>9:30 AM</u> 3:00 PM	<u>August 30, 2018</u>
Event Time(s) <u>8 am - 3 pm</u>			Room(s) / Area Requested: <u>W119</u>
Name of Organization and Event Being Held <u>Wynford Yearbook Pics</u>	Number of Persons Attending Meeting <u>5 at a time</u>		
Address	Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: <u>Dan Dornbirer</u>	Business Name: <u>Wynford HS</u>		
Phone Numbers: Home: <u>42253</u>	Contact Person: <u>Todd Enders</u>		
Work: _____ Cell: _____	Phone Number: <u>419-562-7828</u>		
PCTC Requested Services: (Identify No. Needed)	Address: <u>3288 Holmes Center Road Bucyrus</u>		
<u>Room Setup</u> <u>Electronic</u> <u>Café</u> OR <u>Culinary Arts</u>	If specific hookup/utility needs are required see attached: (check one) <u>Yes</u> or <u>x No</u>		
<u>Chairs</u> <u>Microphone</u> <u>Drinks</u>	Estimated time of arrival at Pioneer for setup/delivery: <u>8:00 AM</u>		
<u>Tables</u> <u>Ovrhd. Proj.</u> <u>Snacks</u>	Other/Specify: _____		
<u>Chalkboard</u> <u>Video Camera</u> <u>Breakfast</u>	_____		
<u>Lectern</u> <u>Video Recorder</u> <u>Luncheon</u>	_____		
<u>Coat Racks</u> <u>Internet Access</u> <u>Dinner</u>	_____		
For specific room setup, see attached design: (check one) <u>Yes</u> or <u>No</u>	Date of contact with Cafeteria/Culinary Arts Services if used for this event: _____		

## Part II - To be completed by PCTC Personnel

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	<u>7/5/2018</u>	<u>[Signature]</u>
Billed for Services		
Referred to Board		

## Responsibility Notice

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.

**Any and all information on this form may be shared with the public through our publicly accessed calendar.**

Signature (person in charge of activity)  
[Signature]

Date: 8-30-18

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.

Thank you for selecting Pioneer for your event!