

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>9/25/2024</u>		All day	Set up	Date Request Submitted
Activity: Day(s) <u>Wednesday</u>				June 10th, 2024
Event Time(s) <u>6:00pm to 8:00 pm</u>				Room(s) / Area Requested:
Name of Organization and Event Being Held Master Teacher Ceremony		Number of Persons Attending Meeting 30		Pioneer Room
Address		Services to be provided by outside person(s)/vendors (i.e. caterer, photographer, etc.)		
Contact Person: <u>Shannon Sprang</u>		Business Name: _____		
Phone Numbers: Home: _____		Contact Person: _____		
Work: <u>42209</u> Cell: <u>419 3477744</u>		Phone Number: _____		
PCTC Requested Services: (Identify No. Needed)		Address: _____		
<u>30</u> Chairs <u>x</u> Microphone <u>x</u> Drinks <u>8</u> Tables <u> </u> Ovrhd. Proj. <u>x</u> Snacks <u> </u> Chalkboard <u> </u> Video Camera <u> </u> Breakfast <u>x</u> Lectern <u> </u> Video Recorder <u> </u> Luncheon <u>x</u> Coat Racks <u>x</u> Internet Access <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: _____ _____ _____		
For specific room setup, see attached design: (check one) <u> </u> Yes or <u>X</u> No		Date of contact with Cafeteria/Culinary Arts Services if used for this event: _____		

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

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
<u>OK</u>	<u>6/20/24</u>	<u>KWK</u>

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.

Shannon Sprang

Signature (person in charge of activity)

Date: _____

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!