COLUMBIANA COUNTY CAREER AND TECHNICAL CENTER

Attention: Cindy Schmidt 9364 STATE ROUTE 45 LISBON, OH 44432

TELEPHONE: 330-424-3498 email: cindy.schmidt@ccctc.k12.oh.us APPLICATION FOR USE OF BUILDING

PLEASE NOTE: IF THIS APPLICATION IS NOT RETURNED WITHIN FIVE BUSINESS DAYS OF THE DATE YOU FIRST REQUESTED USE OF THE CCCTC, THE DATE WILL BE RELEASED FOR USE BY OTHER GROUPS/ORGANIZATIONS.

				Date of Application
1.	Name of Organization:			
2.	Date of Meeting:	Hours:	to _	AM/PM
3.	Title of Meeting:			
4.	Rooms needed: (please che Classroom Cafetorium Restaurant	eck) - -	5.	Equipment needed: See attached form
6.	General: Will admission be charged Anticipated attendance			Will refreshments be served? Yes No
7.	Nonprofit organization? Y	es No	-	
8.	Name of the individual res	ponsible for meeti	ng:	Email:
	Address:			
	City, state, zip:			Phone:
I HA INDI AND GRO TEC	GROUNDS OF THE COL AVE READ THE POLICIES, R EMNIFY AND HOLD HARMI O THEIR AGENTS AND EMPI OUP ACTIVITIES, WHETHER HNICAL CENTER BOARD O	UMBIANA COU EEGULATIONS AN ESS THE COLUMI OYEES FROM AL IT BE CAUSED BY F EDUCATION OR	NTY CAR ID FEE SC BIANA CO L LIABILI' ' NEGLIGE EITHER F	ES IS STRICTLY PROHIBITED IN THE BUILDINGS OR OR EER AND TECHNICAL CENTER. CHEDULES FOR USE OF THE ABOVE FACILITY AND AGREE TO OUNTY VOCATIONAL SCHOOL DISTRICT BOARD OF EDUCATION TY, CLAIMS, DEMANDS OR COST FOR OR ARISING OUT OF OUTENCE OF INDEMNITOR OF COLUMBIANA COUNTY CAREER AND PARTY'S AGENTS, EMPLOYEES OR OTHERWISE. DATE
	NATURE OF PERSON ACCEP			DATE
	changes of information contail-9561 ext. 149.	ned on this form w	ithin 48 h	ours of use must be approved by the building and grounds supervision
	Building use fees for no additional \$40.00 per ho		will be ch	arged at a minimum of \$160.00. Anything over 4 hours wil
	l charges for your event _ cable.		(1	minimum of \$160 for non-school hours) + food service, if
Schoo	ol Official			Signature of Applicant

Columbiana County Career and Technical Center Building Use Rules Requests will not be considered unless the request is made at least fourteen days prior to the event.

Because our students must return home at a reasonable hour; because our employees are not scheduled to work Saturdays, Sundays and holidays; and because our custodial maintenance schedule necessitates all major projects be completed during the periods of the year when students are not in session, the following limitations will apply to all requests (including banquet requests):

- 1. The building will be closed at 10:00 p.m. Monday Saturday.
- 2. The building will be closed during Fall Break, Winter Break, Spring Break and the summer.
- 3. No alcoholic beverages are permitted to be served or brought onto the premises at any time.
- 4. By law, smoking is prohibited in the building *or* on the grounds.
- 5. The building will not be scheduled for wedding receptions or other party type functions.

The following fees shall be charged to organizations renting rooms/facilities of the Columbiana County Career and Technical Center:

- 1. A \$40 per hour building use fee will be charged for the use of school facilities when school is not scheduled to be open.
- 2. Other charges will be determined by the Superintendent or designee and listed on the building use agreement.

LIABILITY INSURANCE AGREEMENT

I certify that the					
\$1,000,000. A copy of insurance is to be returned with signed agreement for use of the Columbiana County Career and Technical Center facilities for public use during our group's scheduled event. I					
certify that this insurance provides \$1,000,000 in liability coverage for damages arising from negligence of any organizations, groups or individuals participating at our invitation in the event.					
Signature					
The building use form wil	I not be approved until CCCTC receives a certificate of liability				

The building use form will not be approved until CCCTC receives a certificate of liability insurance.

EQUIPMENT USE

When using the Columbiana County Career and Technical Center sound system or other technology equipment for an event, a representative of your organization will be required to schedule a week day appointment with our Technology Department for training, prior to use of the equipment.

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TELEPHONE: 330-424-9561 EXT. 112

Name of Organization:						
Date of Meeting: to AM/PM						
Title of Meeting:						
Table/ seating arrangement diagram: Kitchen						



APPLICATION FOR BUILDING USE: TECHNOLOGY/EQUIPMENT NEEDED FORM

DATE OF EVENT	ORGANIZATION			
BANQUETNO	CONTACT PERSON			
SOUND SYSTEM WITH MICROPHONE	PODIUM			
POWER POINT PROJECTOR/SCREEN	WIRELESS NETWORK: USERNAME/ PASSWORD REQUIRED			
DATE SCHEDULED FOR TRAINING:				
PLEASE NOTE: WE <u>DO NOT</u> PROVIDE COMPUTERS OR LAPTOPS.				
Signature	Date			
FOR OFFICE USE ONLY: Date sent to "TRACK IT" with attached form				