



2017 Hawaii Land Use Law Conference

**Thursday, January 19, 2017
 & Friday, January 20, 2017
 9:00 a.m. to 5:00 p.m.**

Where: YWCA, Fuller Hall
 1040 Richards Street
 Honolulu, HI 96813

Cost: \$200 RPFSS Section Members &
 Government Attorneys

\$300 All other HSBA Members

\$325 Other Professionals

*Cost includes registration for both days. You must register for both days.

Credit: This seminar qualifies for
 12 CLE credits
 (3 of which are Ethics)

Contact: HSBA CLE Department
 at 808-537-1868
 or CLE@hsba.org

ADA Accommodation: In Accordance with the Americans with Disabilities Act, if you require accommodation for a disability, please contact us by email at cle@hsba.org; or by phone at 537-1868 and ask for the CLE Department at least two (2) business days before the event.

Questions? Please contact HSBA CLE Department at 537-1868 or CLE@hsba.org.

Registration for the biennial 2017 Hawaii Land Use Law Conference is now open. Presented by the HSBA Real Property and Financial Services Section (RPFSS), the UH Law School, and the Hawaii State Bar Association, this 2 day conference is a must attend for any attorney or professional whose practice involves land use and development.

Distinguished land-use practitioners, scholars, planners, and regulators from Hawaii and the Mainland will discuss timely and relevant issues, including:

- Transit Oriented Development
- TMT and Native Hawaiian Rights
- GMO Regulation and Preemption in the 9th Circuit
- The Public Land Trust Doctrine

Complete and mail this form to Hawaii State Bar Association, 1100 Alakea Street, Suite 1000, Honolulu HI 96813 OR fax (808) 521-7936 OR email CLE@hsba.org

Print Full Name _____ J.D. Number (if applicable) _____

Employer _____

Address _____

Phone _____ Email Address _____

\$200 - RPFSS MEMBERS/GOVERNMENT ATTORNEYS

\$300 - OTHER HSBA MEMBER

\$325 - OTHER PROFESSIONALS

TOTAL PAYMENT \$ _____

ADA Accomodation Requested: Describe _____

PAYMENT TYPE: Check Visa Mastercard

Credit Card Number _____ Expiration Date _____ Security Code _____

Print Card Holder's Name _____ Card Holder's Signature _____

Cancellation/Refunds: Cancellation requests must be received in writing (to cle@hsba.org or by mail) by Thursday, January 12, 2017 for a full refund. **There will be no refunds for no shows.**