

Summer **Gmm**

Board Games

Winning in real estate

Registration opens
April 16

SUCCESS



	NETWORKING		
		TRADESHOW	
	KEYNOTE SPEAKER		

— June 15, 2018 —

Hilton Hawaiian Village

2018 SUMMER GMM REGISTRATION FORM

REGISTRATION

\$50 member (\$60 non-member) by Fri., May 25, additional \$10 charge after this date. No registrations after June 1.

To register:

P. 808.732.3000

F. 808.732.8732

E-mail: registration@hcentral.com

Mail: HBR, 1136 12th Ave., Ste. 200, Honolulu, HI 96816

If you require reasonable accommodations, please notify us when making your reservation.

LOCATION/PARKING

Hilton Hawaiian Village, Coral Ballroom. Self-parking: \$8/Valet: \$13.

MORE DETAILS

For more details, visit: members.hcentral.com/gmm

Bring your HBR SmartCard for easy check-in and chance to win prizes!

Reserved tables require 5 names and payment for entire table when submitted. Forms with less than 5 names will be given open seating.

Yes, I want to reserve a table.

Contact Name for Table: _____

PRINT NAME	FIRM NAME	\$50 MEMBER	\$60 NON-MEMBER	VEGGIE MEAL
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

METHOD OF PAYMENT: Cash Check (payable to HBR) Visa Mastercard AMEX Discover

CARD NO: _____

EXP DATE: _____

NAME ON CARD: _____

SIGNATURE: _____

TOTAL PAYMENT: \$ _____

CONTACT PHONE: _____ FAX: _____

E-MAIL: _____

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