Please have your California driver's license or ID available.

**UPLAND PUBLIC LIBRARY ADULT REGISTRATION**

NAME _____

ADDRESS _____APT. # _____

CITY _____ZIP_____

PHONE ( ) _____

DR. LIC# _____ BIRTHDATE _____

**Email address:_____@_____**

I am opting for additional text messages via my phone carrier:

**Carrier:_____**
**(I'm aware my carrier may charge additional fees for texts.)**

The Upland Public Library is committed to protecting your privacy. Any information you choose to provide the Library will only be used to provide or improve library services, and your information will not be shared with or sold to outside parties.

I agree to:

- Accept responsibility for any use of my library card
- Follow library policies and procedures
- Present my card for all library transactions.
- Pay all fees or fines and report lost or stolen card
- Report change of address, email address and phone number

**Signature_____**

STAFF USE ONLY

LIBRARY CARD #_____

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