

Hartmann Learning Center  
1 ½ Hood Road  
Derry, NH 03038  
603-689-5196  
[jill@hartmannlearning.com](mailto:jill@hartmannlearning.com)

**Registration Form  
Early Literacy Program**

---

Child's Name

Child's Age

---

Child's grade (moving into)

---

Parent/Guardian Name

Parent/Guardian Phone

---

Parent/Guardian Email

---

Parent/Guardian Address

---

City, State, Zip

---

Parent/Guardian Phone

Work Phone

Cell Phone

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_