

# INFANT MENU



YOUTH & FAMILY  
SERVICES

Date/Year \_\_\_\_\_ Provider's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Infant's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Infant served: Bottled Breastmilk \_\_\_\_\_ Formula (IFIF) \_\_\_\_\_ Brand of formula offered by provider \_\_\_\_\_

Formula provided by: Parent \_\_\_\_\_ Child Care Provider \_\_\_\_\_ Brand of formula provided by parent \_\_\_\_\_

*By participating in the Child and Adult care Food Program, your child care provider is required to offer at least one type of iron-fortified infant formula for infants in his or her care. If you choose not to accept the infant formula offered by your provider and opt to supply your own formula, please sign below.*

\_\_\_\_\_  
Parent's Signature (required if parent provides formula)

AGE		MEAL	FOOD CHOICES
<b>0-3 Months</b>	<input type="checkbox"/>	<b>BREAKFAST</b> * 4-6 fl. oz. iron-fortified infant formula <b>or</b> bottled breastmilk	(Circle foods served) <b><u>IFIC</u></b>
	<input type="checkbox"/>	<b>LUNCH/SUPPER</b> * 4-6 fl. oz. iron-fortified infant formula <b>or</b> bottled breastmilk	Rice Oats Mixed Other:
	<input type="checkbox"/>	<b>SNACK</b> * 4-6 fl. oz. iron-fortified infant formula <b>or</b> bottled breastmilk	<b><u>Meats</u></b>
<b>4-7 Months</b>	<input type="checkbox"/>	<b>BREAKFAST</b> * 4-8 fl. oz. iron-fortified infant formula <b>or</b> bottled breastmilk	Beef Turkey Ham Chicken Other:
	<input type="checkbox"/>	0-3 tbsp. iron-fortified infant cereal (IFIC) - optional	
	<input type="checkbox"/>	<b>LUNCH/SUPPER</b> * 4-8 fl. oz. iron-fortified infant formula <b>or</b> bottled breastmilk	<b><u>Fruits</u></b>
	<input type="checkbox"/>	0-3 tbsp. iron-fortified infant cereal (IFIC) - optional	Applesauce Bananas Peaches Pears Plums Apricots
<input type="checkbox"/>	<b>SNACK</b> * 4-6 fl. oz. iron-fortified infant formula <b>or</b> bottled breastmilk	Other:	
<b>8-11 Months</b>		<b>BREAKFAST</b>	
<input type="checkbox"/> Will serve foods from the Child Menu as appropriate	<input type="checkbox"/>	* 6-8 fl. oz. iron-fortified infant formula <b>or</b> bottled breastmilk	<b><u>Vegetables</u></b>
	<input type="checkbox"/>	* 2-4 tbsp. iron-fortified infant cereal (IFIC)	Carrots Squash Green Beans Beets Peas Sweet Potatoes Potatoes Other:
	<input type="checkbox"/>	* 1-4 tbsp. fruit <b>and/or</b> vegetable	
	<input type="checkbox"/>	<b>LUNCH/SUPPER</b> * 6-8 fl. oz. iron-fortified infant formula <b>or</b> bottled breastmilk	
<input type="checkbox"/>	* 2-4 tbsp. iron-fortified infant cereal (IFIC) <b>and/or</b> 1-4 tbsp. meat, fish, poultry, egg yolk or cooked dry beans or peas; <b>or</b> 1/2-2 oz. cheese; <b>or</b> 1-4 oz. cottage cheese, cheese food or cheese spread		
<input type="checkbox"/>	* 1-4 tbsp. fruit <b>and/or</b> vegetable		
<input type="checkbox"/>	<b>SNACK</b> * 2-4 fl. oz. iron-fortified infant formula <b>or</b> bottled breastmilk <b>or</b> 100% fruit juice	<b><u>100% Fruit Juice</u></b>	
<input type="checkbox"/>	0-1/2 slice bread <b>or</b> 0-2 crackers (optional)	Apple Prune Grape Pear Pineapple Orange Other:	

*\*Required food components*