

Infant Feeding Instructions

PRINT Child's Full Name: _____

DOB: ____/____/____

LIST Any Allergies: _____

Please **CHECK** answers that apply (SIGN AND DATE BELOW):

Breast Feeding? <input type="checkbox"/> Yes <input type="checkbox"/> No	Bottle Fed? <input type="checkbox"/> Yes <input type="checkbox"/> No FORMULA NAME: _____
Formula: Times to be fed: <input type="checkbox"/> Every _____ Hours OR <input type="checkbox"/> On Demand Parent will provide nursery water to mix with formula: <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount of ounces per feeding? _____ ounces BOTTLE IS TO BE: <input type="checkbox"/> Heated <input type="checkbox"/> Room Temp <input type="checkbox"/> Cold <input type="checkbox"/> Bottle Warmer Only
MY CHILD'S DIAPER SIZE: _____	

	Amount	Morning	Noon	Afternoon
Juice:				
Cereal:				
Fruit:				
Vegetables:				
Meat:				
Other Foods:				

Does your child use a pacifier? Yes No Times: _____

To apply diaper ointment, we need parent's consent: /Signature/ _____ Brand: _____

Times to apply ointment/COMMENTS: _____

Is there any additional information you would like for us to know while feeding your child? _____

Parent Signature: _____ Date: _____

The Texas Department of Family and Protective Services Minimum Standards for Child Care Centers requires that licensed childcares obtain written feeding instructions that are signed and dated by the child's parent(s). The standard requires that the parent review and update the feeding instructions every 30 days until the child is eating food provided by the Child Development Center.