



PARENT/PROVIDER INFANT FEEDING AGREEMENT

Required to be filled out along with the Child Enrollment Form for any infant age 6 weeks - 1st birthday

Provider Name		Provider Number	
Child Name		Date of Birth	

- The Provider must offer at least one Iron-Fortified Infant Formula (IFIC). Parent may decide to decline this formula and bring their own formula or breastmilk. The provider may claim reimbursement for infant meals/snacks when a meal/snack contains only breastmilk or infant formula (which meets program requirements), regardless of who supplies.

- The provider must supply infant foods when infants are developmentally ready according to the CACFP requirements. Infant foods include fruits, vegetables, meat, meat alternates, and grains that are creditable to the USDA Infant Meal Pattern.

<i>To Be Completed by the Provider</i>	
Name of Iron-Fortified Infant Formula offered by provider :	

<i>To be completed by the Infant's Parent (one choice for breastmilk/formula & one choice for infant food)</i>			
	I will supply breastmilk or infant iron fortified formula for my infant:		
	I accept the iron-fortified formula offered by my provider listed above		
	I accept my provider's offer to supply supplemental foods when my infant is developmentally ready		
	I decline my provider's offer to supply supplemental foods, I will supply all my infant's foods.		
Parent Signature		Date	