



(Month)

Infant Feeding Plan

For children ages 6 weeks- 12 months

Child's Full Name: _____

Date of Birth: ____/____/____

Instructions to Parents/Guardians:

- Bottles must be pre-mixed (if applicable), labeled with child's full name, current day's date and ready to be served.
- Disposable Nurser Bags must be refrigerated or frozen, stored only with the amount of milk for one feeding, labeled with the child's full name and date of collection.
- Kids R Kids follows the recommendations of the SIDS Alliance sleep practices for infants. Only sleep sacks approved by TDPRS are allowed in the crib with the baby.

Does child use a pacifier? ☐ Yes ☐ No

Child's diet includes (check all that apply):

Formula	<input type="checkbox"/>	Juice	<input type="checkbox"/>
Breast Milk	<input type="checkbox"/>	Baby Foods	<input type="checkbox"/>
Whole Milk	<input type="checkbox"/>	Strained Foods	<input type="checkbox"/>
Water	<input type="checkbox"/>	Table Foods	<input type="checkbox"/>

Formula type: _____

Bottle's Formula Amount: _____

Breast Milk Storage: ☐ Bottles ☐ Disposable Nurser Bags

Bottle's Breast Milk Amount: _____

Bag's Breast Milk Amount: _____

Food Likes: _____

Food Dislikes: _____

Allergies: _____

Restrictions: _____

Infant's Schedule	Time of Day	Type and Approximate Amount of Food
Breakfast:		
Lunch:		
Dinner:		
Morning Nap:		
Afternoon Nap:		

Additional Instructions (i.e. for the introduction of solid foods, dietary changes):

I understand it is my responsibility to keep Kids 'R' Kids # _____ updated, in writing, as my child's needs change or **every 30 days**, and that it is Kids 'R' Kids policy that bottles are held, not propped, during feeding & that bottles are discarded within an hour after warmed.

Parent/Guardian Signature Date

____/____
Initial Date

____/____
Initial Date

____/____
Initial Date

____/____
Initial Date

____/____
Initial Date

____/____
Initial Date