



Partners in Nutrition  
85 7<sup>th</sup> Place E, Ste 250  
St. Paul, MN 55101

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# INFANT MEAL NOTIFICATION LETTER

Dear parents and guardians of infants under one year of age:

All children enrolled in this child care center, including infants, are eligible for meals through the United States Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP), which provides financial support to off-set the cost of nutritious meals and snacks. To fully meet CACFP requirements, this center is required to provide formula and other required infant foods to enrolled infants until they turn one year of age.

The iron-fortified infant formula this center offers is: \_\_\_\_\_

**You may choose to bring your own iron-fortified infant formula or breast milk and other infant foods that meet the CACFP Infant Meal Pattern requirements.** A copy of the CACFP Infant Meal Pattern is printed on the back of this letter. Reimbursement for your infant's meals will only be provided when a meal contains breast milk or iron-fortified infant formula regardless of who supplies it. Please note that the center will also introduce semi-solid foods to your infant according to the decisions made by you and your infant's doctor.

## FORMULA OR BREAST MILK: (CHECK ONE)

- I want the center to supply formula for my infant.
- I will provide the following formula for my infant: \_\_\_\_\_  
*Note: I understand that I will need to submit a Special Diet Statement if I provide a low-iron infant formula or other special formula for my infant.*
- I will provide breast milk for my infant.

## SOLID FOOD: (CHECK ONE)

- I want the center to supply solid food for my infant when he/she is developmentally ready.
- I will provide my own choice of infant cereal and/or other foods instead of accepting the iron-fortified infant cereal and/or other foods provided by this center.

Infant's name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_

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



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# CACFP INFANT MEAL PATTERN

## BREAKFAST

	Ages 0-3 months	Ages 4-7 months	Ages 8-11 months
Breast Milk or Formula	4-6 oz.	4-8 oz.	6-8 oz.
Infant Cereal	-	0-3 Tbsp. (when ready)	2-4 Tbsp.
Plain Fruit or Vegetable	-	-	1-4 Tbsp.

## SNACK

	Ages 0-3 months	Ages 4-7 months	Ages 8-11 months
Breast Milk, Formula or Juice	4-6 oz.	4-6 oz.	2-4 oz.
Bread or Crackers	-	-	0 - 1/2 slice bread 0-2 crackers

## LUNCH OR SUPPER

	Ages 0-3 months	Ages 4-7 months	Ages 8-11 months
Breast Milk or Formula	4-6 oz.	4-8 oz.	6-8 oz.
Iron Source	-	0-3 Tbsp. Infant Cereal (when ready)	2-4 Tbsp. Infant Cereal OR 1-4 Tbsp. Meat OR 1/2 oz. Cheese
Plain Fruit or Vegetable	-	0-3 Tbsp.	1-4 Tbsp.

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