



P.O. Box 495
Dover, DE 19903

Catholic Charities, Inc.

Child and Adult Food Care Program

Phone: 674-1600 or 1-800-239-2839

Infant Feeding Information & Documentation

Providers are required to offer infants a meal that meets the infant meal pattern specifications. This includes formula or breast milk until the age of one year.

Provider offered _____ formula

Please check any of the following that apply:

_____ My provider will supply **all** formula and food.

_____ I will provide breast milk/formula of my choice, and my provider will supply all food.
Circle breast milk or formula.

Name the formula _____

_____ I will provide breast milk/formula and all food for my infant.

Name of provider _____

Name of infant _____

Date of birth _____

Date infant started _____

Name of parent _____

Parent's address _____

Parent's daytime telephone _____

Parent's signature _____ Date _____