

Parent/Provider Infant Formula & Feeding Agreement

**PROVIDER: Be sure ALL information on this form is complete.**

WECA provider's first/last name \_\_\_\_\_ WECA ID# \_\_\_\_\_

**Childcare providers must offer to supply at least one type of iron-fortified infant formula (write it below) and all solid foods for each infant. Parents/guardians may choose to decline the formula and/or solid foods and supply different formula or breast milk or solid foods themselves. Parents/guardians cannot be required to supply infant formula or foods.**

**PROVIDER: USDA REQUIRES: I offer this iron-fortified infant formula:** \_\_\_\_\_

Infant's Name \_\_\_\_\_ Infant ID# \_\_\_\_\_ Date of Birth \_\_\_\_\_

- If the parent supplies any infant foods, you must submit an online fillable form located at [www.wisconsinearlychildhood.org](http://www.wisconsinearlychildhood.org) under Food Program Forms - Food Claims - Infant Food Provided by Parent, or highlight them in yellow on your paper infant menus.
- Submit an updated Parent/Provider Formula Agreement if there is a change in source (parent or provider) of formula or foods. If you need additional copies of this form visit [www.wisconsinearlychildhood.org](http://www.wisconsinearlychildhood.org) under Food Program Forms.

**PARENT:** All children enrolled in this child care, including infants, are eligible for meals through the United States Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP). Child care providers in the program are reimbursed to help with the cost of serving nutritious meals to enrolled children. The meals must meet CACFP nutrition guidelines for children and infants. To meet CACFP requirements, this provider will offer to supply formula and other foods for infants. **To help provide the best nutritional care for your infant, please complete the following information and return this form to the provider:**

I understand that the child care provider will supply the above iron-fortified infant formula for infants according to the CACFP requirements.

**PARENT: USDA REQUIRES A or B:**

**A. If you formula-feed your infant, place a check mark (✓) by only ONE of the following:**

- I prefer to have my childcare provider supply formula; OR,
- I will supply formula for my infant. (Not all infant formulas meet the CACFP criteria.)

**B. If you breastfeed your infant, place a check mark (✓) by only ONE of the following:**

- I will supply expressed (pumped) breast milk; OR,
- I will supply expressed (pumped) breast milk and have the childcare provider supply formula to supplement as needed; OR,
- I will supply expressed (pumped) breast milk and I will supply formula to supplement as needed.

I understand that the childcare provider will supply infant food for infants as they 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. Parents or guardians may, but are not required to, supply one meal component in order for the meal to be reimbursable to the provider.

**PARENT: USDA REQUIRES: Place a check mark (✓) by ONE of the following:**

- I prefer to have the childcare provider supply solid infant foods; OR,
- I will supply solid infant foods for my infant.

This childcare provider has not requested or required me to provide infant formula or food for my infant. I understand that I have the choice of having my infant participate in the CACFP.

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**