



Family Space Quinte Inc.

Home Child Care Program

INFANT FEEDING SCHEDULE

Child's Name: _____ Date: _____

Birth Date: _____

Name of Caregiver: _____

The Day Nurseries Act requires that all children under 12 months of age have a written feeding schedule completed by parents.

Please give the schedule to your caregiver and update regularly as you and your doctor decide to add new foods.

Food/Liquid	Kind, Amount and Time	Observations/Comments
Formula or Milk	Kind: _____ Amount: _____ Time: _____	
Juice	Kind: _____ Amount: _____ Time: _____	
Cereal	Kind: _____ Amount: _____ Time: _____	
Meat	Kind: _____ Amount: _____ Time: _____	
Vegetable	Kind: _____ Amount: _____ Time: _____	
Fruit	Kind: _____ Amount: _____ Time: _____	
Other	Kind: _____ Amount: _____ Time: _____	

Parent's Signature

Date