



OPEN ARMS LUTHERAN CHILD DEVELOPMENT CENTER OF BUCKHEAD, INC.

NAME OF SPONSOR: _____

NAME OF PROVIDER/CENTER: **Open Arms Lutheran Child Development Center of Buckhead, Inc.**

According to USDA regulations, as an institution participating in the Child and Adult Care Food Program I must offer to provide meals to all infants enrolled for care in my center/facility.

I will provide **SIMILAC (Milk-based iron-fortified formula)** and **RICE/OATMEAL CEREAL (iron fortified infant cereal)** to Infants enrolled for care in my center.

Parents/Guardians, please check one of the following options and sign below:

_____ I would like Open Arms Lutheran CDC to provide the milk-based iron-fortified infant formula and iron-fortified infant cereal listed above to my infant and I will provide clean, sanitized and labeled bottles daily.

_____ I will provide _____ (milk-based iron-fortified formula) and _____ (iron-fortified infant cereal) for my infant on a daily basis.

Parent/Guardian Signature

Date

*Any parent requesting any formula other than a USDA approved milk-based or soy-base iron-fortified formula be provided to their infant or any parent who provides any formula other than a USDA approved milk-based or soy-based iron-fortified formul for their infant must provide a doctor's note indicating the required use of the formula. If a parent elects to have the center or day care home provider supply meals to their infant, the infant will be fed according to its individual feeding plan that is provided by the parent or guardian although the center or day care home provider may only claim reimbursement for no more than breakfast, lunch or supper and a snack.