



# Your baby's day... at a glance

Child's Name: \_\_\_\_\_

Primary Caregiver: \_\_\_\_\_

## **Bottles:**

Times for feedings or intervals between bottles: (ex: 10:00, 12:00 or every 4 hours)

\_\_\_\_\_

How many ounces: \_\_\_\_\_

## **Breakfast:**

Time: \_\_\_\_\_

What should your child eat? (ex: cereal, fruit, and yogurt)

\_\_\_\_\_

## **Lunch:**

Time: \_\_\_\_\_

What should your child eat? (ex: 1 jar vegetables, 1 jar fruit, and juice)

\_\_\_\_\_

## **Dinner:**

Time: \_\_\_\_\_

What should your child eat? (ex: 1 jar vegetables, 1 jar fruit, and juice)

\_\_\_\_\_

## **Snacks:**

Times: \_\_\_\_\_

What should your child eat? (ex: biter biscuits, wagon wheels, cheerios)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## **Naps:**

When does your child usually nap:

\_\_\_\_\_

\_\_\_\_\_

How long does your child usually nap for:

\_\_\_\_\_

\_\_\_\_\_

Any other special instructions:

\_\_\_\_\_

\_\_\_\_\_