



TRINITAS
A C A D E M Y

ALTERNATE NUTRITION PLAN

State of Florida & Broward County
Bureau of Children's Services
Child Care Licensing and Enforcement Section

Alternate Nutrition Plan

Date: _____

Name of Facility: Trinitas Academy
Address: 1101 SW 49th Avenue
Plantation, Florida 33317

Dear Parent:

In accordance with the Broward County Child Care Ordinance/Family Child Care Ordinance, parents and the child care facility/home are urged to work cooperatively to assure that children are provided with nutritious snacks and meals where lunches are not provided by the facility.

Please read the following carefully, sign, and return as soon as possible to Trinitas Academy.

The facility/home agrees to provide a nutritious:
(Operator/Director checks those which apply.)

- _____ breakfast
- _____ mid-morning snack
- X mid-afternoon snack
- _____ evening snack
- no meals or snacks

The parent agrees to provide a nutritious:
(Parent checks those which apply.)

- _____ mid-morning snack
- _____ lunch
- _____ mid-afternoon snack
- _____ supper

Meals provided by parents shall consist of the following:

- A. Meat/Poultry/ Fish 2 ounces
- or cheese 2 ounces
- or eggs 1 egg
- or peanut butter 4 tablespoons
- or dried beans or peas 1/2 cup
- B. Fruits (2 or more) 1/2 cup
- or vegetables 1/2 cup
- or fruits and vegetables 3/4 cup total
- amount and vegetables must equal 3/4 cup
- C. Bread 1 slice
- D. Butter 1 teaspoon
- E. Milk 1 cup – 8 oz.

I have read the preceding and agree to meet the child's nutritional needs as defined above.

Operator/Director Signature

Parent Signature