

INSTRUCTIONS

1. Please record everything your child eats or drinks during the day, including snack foods, candies, chewing gum, sodas, etc.
2. Record approximate amounts. (1Cup, 1 T, 1t, average serving, etc.)
3. How is prepared. (raw, cooked, fried, etc.)
4. it is very important that you include all the between meal snacks, and when they are eaten.

FOOD INTAKE DIARY

Name _____

Date _____

FOR THREE DAYS (please include one weekend day)

DAY 1

DAY 2

DAY 3

Breakfast:

Breakfast:

Breakfast:

10:00am:

10:00am:

10:00am:

Lunch:

Lunch:

Lunch:

3:00pm:

3:00pm:

3:00pm:

Dinner:

Dinner:

Dinner:

After dinner snacks:

After dinner snacks:

After dinner snacks: