



Infant Enrollment Form

This form will serve as identification for WIC enrollment purposes when filled out completely by **hospital staff**.

TO BE FILLED OUT BY HOSPITAL STAFF

Baby's First & Last Name: _____

Date of Birth: _____

Baby's Birth Length: _____

Baby's Birth Weight: _____

Mothers Name: _____

Father's Name: _____

Date: _____

Name and Credentials _____

Breastfeeding: Yes No

Baby's First WIC appointment

Call to schedule an appointment when baby is home.

You will need to be able to provide the following proofs:

- Baby's ID**
(This signed and completed form (WIC Infant Enrollment Form), signed worksheet for the birth certificate, signed souvenir birth certificate, social security card or immunization record)
- Parent or guardian ID**
(Driver's license, State ID, Passport, or purple WIC identification card)
- Proof of income for everyone living in the household**
(Pay stub(s) for the last 30 days or blue and white Medicaid card)
- Proof of address**
(Mail or utility bill that includes name and physical address or lease dated within the last 30 days.)

Without all of the items listed, your appointment will have to be rescheduled and WIC food benefits cannot be issued. Contact your local WIC office with questions.

For more information about the Nebraska WIC Program:

WIC is a supplemental food program that gives healthy food, nutrition education, and referrals to pregnant/postpartum women, and infants/children up to five years old. Learn more at <http://dhhs.ne.gov/Pages/WIC-Health-Care-Providers.aspx>