

La Porte County 4-H Dairy Foods Project Record Sheet

Name _____ Division _____

Name of Club _____

Number of years in 4-H _____ Number of years in Dairy Foods _____

I have reviewed this record and believe it to be correct:

Signature of leader _____ Date _____

Purpose: To promote better food habits through the use of “MyPlate” in preparing well balanced meals, and to gain a better understanding of milk products and their benefits.

Did you give a demonstration on your Dairy Foods project? _____

Name of demonstration _____

List three new things you learned in the project this year?

1. _____

2. _____

3. _____

The amount of food from the Dairy Group you need to eat depends on your age. According to the table on “choosemyplate.gov/dairy,” how much should you have for your age?

What other interesting facts did you discover while visiting this website?

Why is it important to include Dairy Foods in your diet?

List the Dairy Foods you prepared this year.

<u>Food prepared</u>	<u>Number of times prepared</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____

List products other than milk that belong to the Dairy group. (Example – yogurt)

Make up a day's menu of meals and snacks that fulfill your nutritional needs from MyPlate.
Circle all the items which are in the Dairy group.

Breakfast:

Lunch:

Dinner:

Snack (optional)