

Name: _____

Date: _____

Body Parts-1

Q Z N O S E P B F I N G E R S B N
K N E E X W P S H I N E C L T S E
T S H O U L D E R B L A D E S V C
K A R M G Z E Q A N K L E H Y U K
I L C E U Z C H I N J F A T G D F
U M V E I N S T O E S O H H C N M
J D A L S C H E S T Q O O H B V B
B L F M N M E A R S Q T T E E T H
L E G I T O B E L L Y B U T T O N
T G E V H U S J E E K B V N W J N
V W Y I I T H P L H Z U Z X C M U
L P E Z G H O Y E E K F G B A C K
T H S W H N U Z O L O B L A E V C
P S Q R H L L J R B T H U M B F E
U O U I C P D E I O L H E A D C K
O I W S W U E B B W B G O M U S D
I G M T R A R H S H H A I R Y H C

Shoulder Blades
Veins
Thumb
Mouth
Toes
Chin
Hair

Belly Button
Thigh
Wrist
Back
Foot
Nose
Head

Shoulder
Ankle
Elbow
Rib
Knee
Ears
Leg

Fingers
Chest
Teeth
Shin
Neck
Eyes
Arm