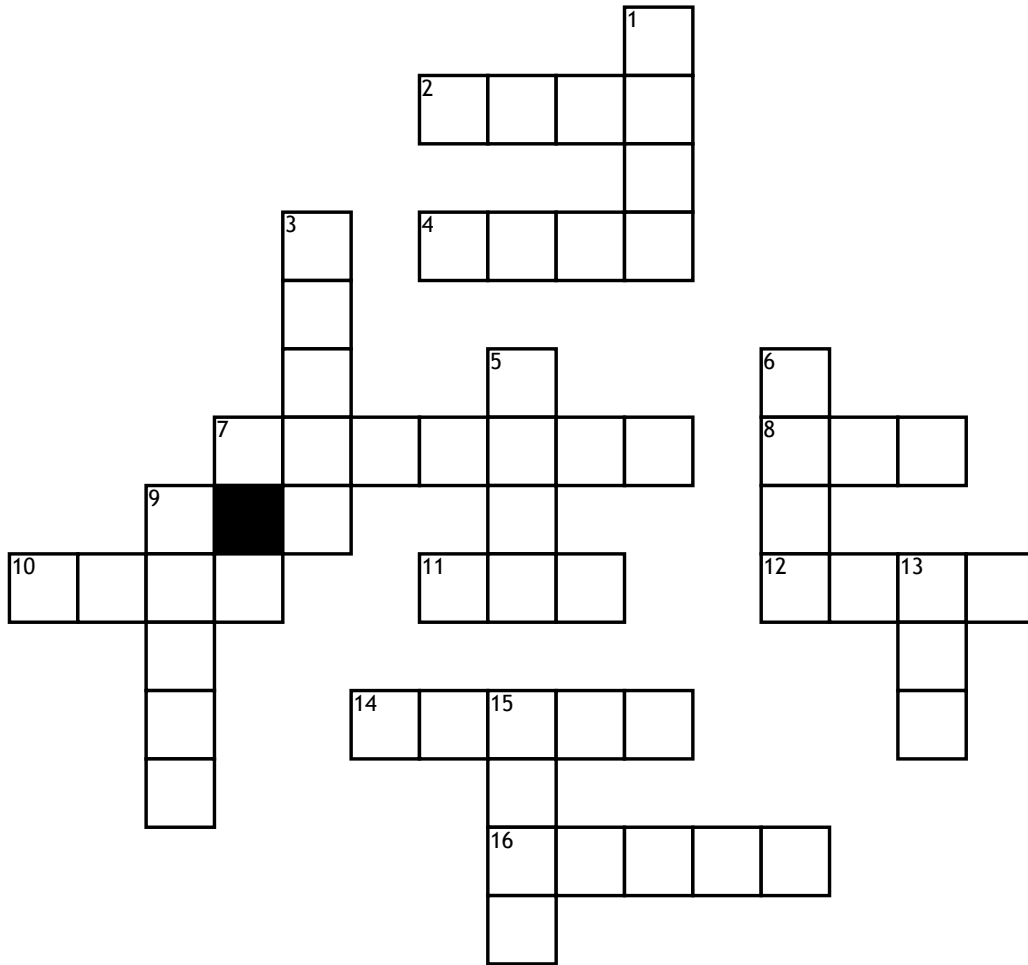


Name: \_\_\_\_\_

Date: \_\_\_\_\_

# Body Parts



## Across

- 2. Nose
- 4. Hand
- 7. Stomach
- 8. Arm
- 10. Foot

- 11. Leg
- 12. Knee
- 14. Chest
- 16. Elbow

- 3. Teeth
- 5. Face
- 6. Back
- 9. Mouth

## Down

- 1. Head

- 13. Ear
- 15. Eyes

## Word Bank

- |       |       |      |       |         |      |
|-------|-------|------|-------|---------|------|
| Chest | Nose  | Head | Leg   | Face    | Arm  |
| Elbow | Teeth | Hand | Foot  | Stomach | Back |
| Eyes  | Knee  | Ear  | Mouth |         |      |