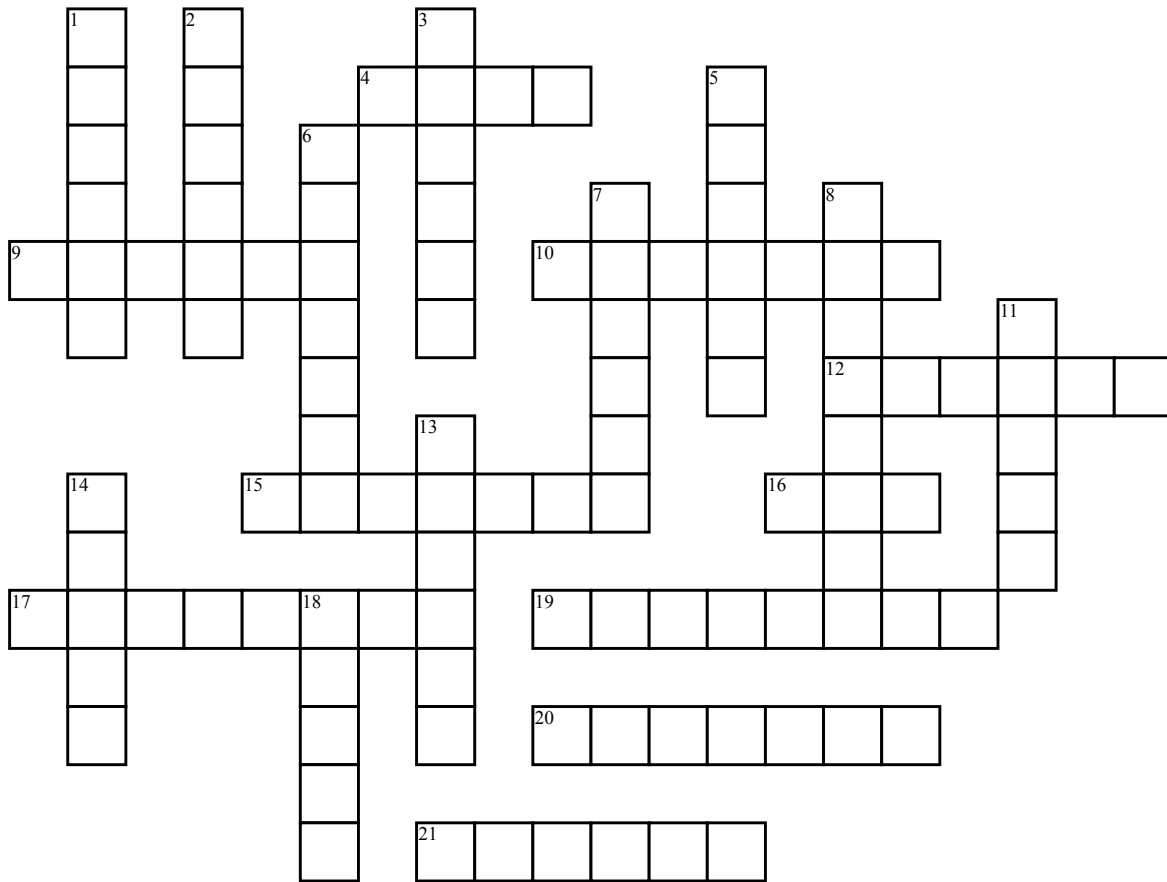


Name: _____

Date: _____

Hockey



Across

4. 95

9. 47

10. 16

12. 18

15. 20

16. 33

17. 5

19. 19

20. 93

21. 7

Down

1. 2

2. 23

3. 27

5. 44

6. 77

7. 45

8. 73

11. 88

13. 1

14. 17

18. 3