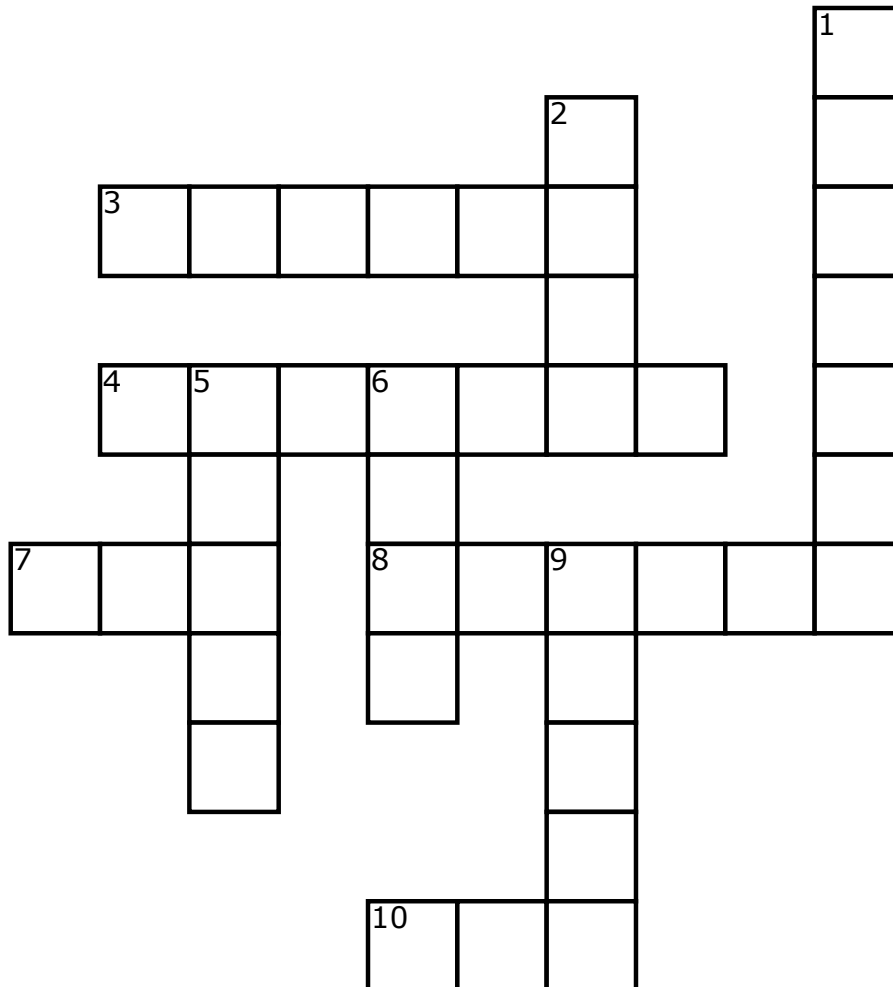


Name: \_\_\_\_\_

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

# La partes del cuerpo



## **Across**

- 3.** leg
- 4.** shoulder
- 7.** foot
- 8.** head
- 10.** eye

## **Down**

- 1.** knee
- 2.** hand
- 5.** ear
- 6.** mouth
- 9.** arm