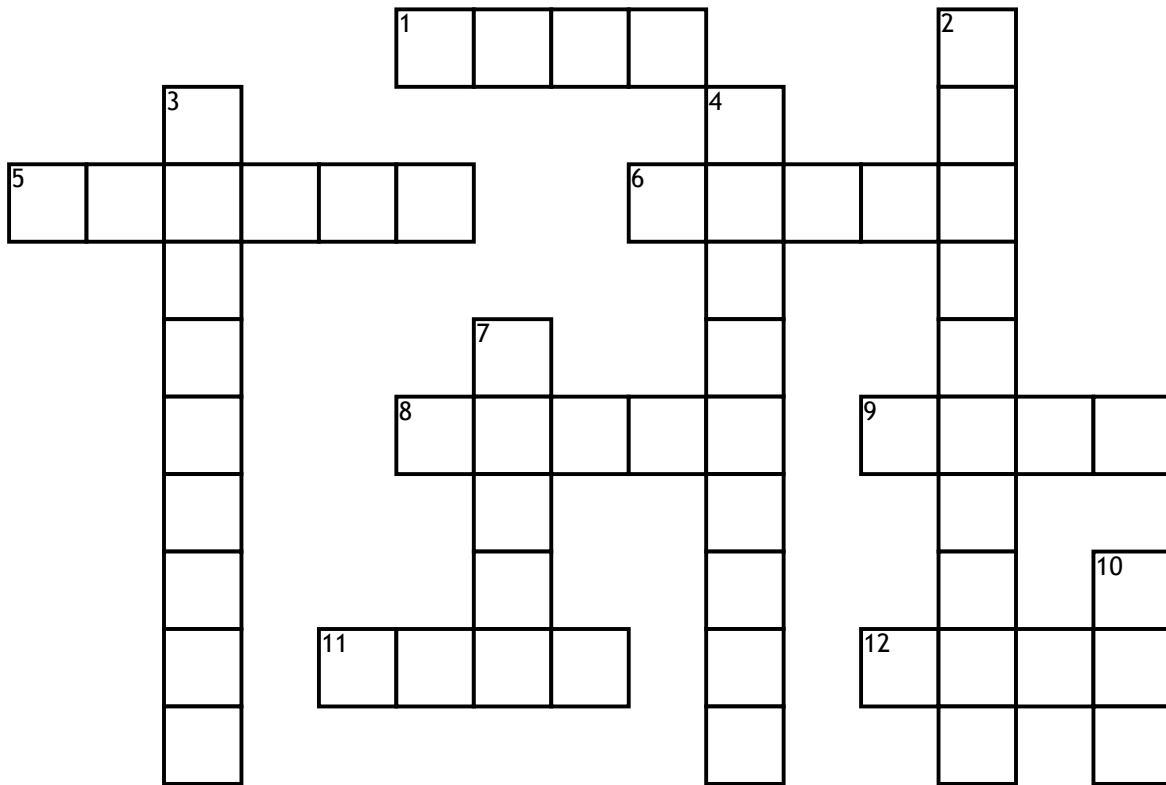


Name: _____

Date: _____

Lilie



Across

- 1. your favourite colour
- 5. your daddy's name
- 6. your favourite uncle's name
- 8. your age

9. your mama's name

- 11. lizzie is a
- 12. the colour of your eyes

Down

2. your pet's name

3. the name of your street

- 4. your mummy's name
- 7. Your teacher's name

10. five times 2