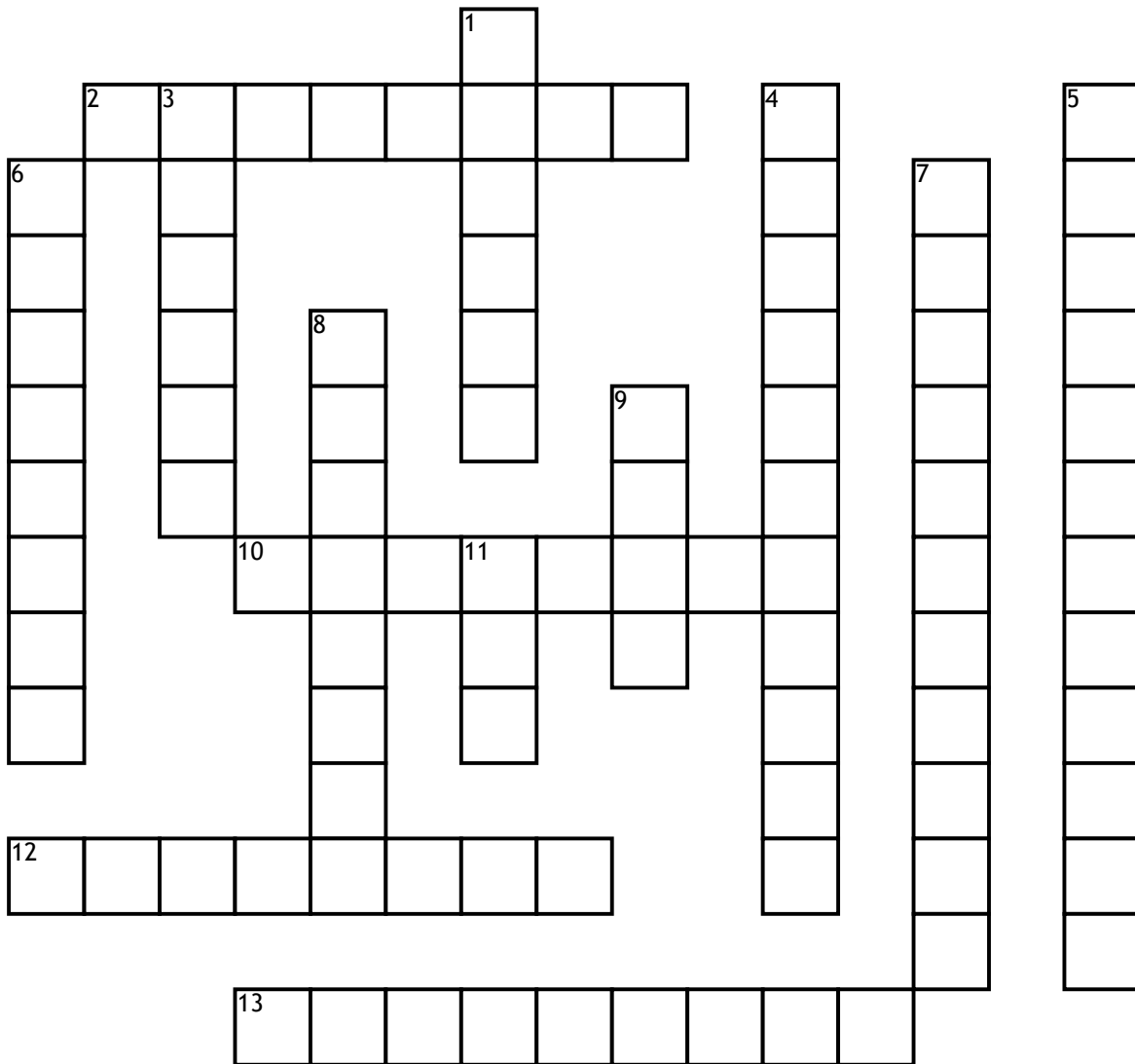


Name: _____

Date: _____

Our relationship



Across

- 2. Word we always say before we do anything without each other?
- 10. My favorite movie?
- 12. What's your favorite movie?
- 13. What's my favorite flower?

Down

- 1. How many years we been together
- 3. The name of the child we share together?
- 4. Our first vacation?
- 5. Where the place we made our relationship official?

- 6. Where the place we fell in love at?
- 7. The day we got together?
- 8. Our first date?
- 9. Tanesha favorite color ?
- 11. What's your favorite color ?