

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

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

# Parts of the Body

T Q R E D L U O H S

L O K F A C E A R M

C U O N T S E H C F

E H L F E Q Q H E E

L Z I I S E A F Y H

B C L N Q N N E M T

O B E G D T O E N U

W A G E A A S Z E O

M C M R A L E W C M

H K H A I R L H K K

shoulder	finger	chest	elbow	mouth
foot	knee	back	hand	neck
chin	nose	face	hair	head
toe	leg	arm	eye	ear