

Name: _____

Date: _____

SKELETAL SYSTEM

N A S H O U L D E R

H P R O T E C T B O

F T G D Z J I S A H

O H H Y H C S K C S

O I I Y A L U U K R

T G P G N E P L B I

P H A X D G P L O B

N E C K B R O K N S

D T B C Q E R I E I

R U A R M U T J F J

SHOULDER BACKBONE SUPPORT PROTECT

THIGH SKULL RIBS NECK

HAND FOOT BONE LEG

HIP ARM