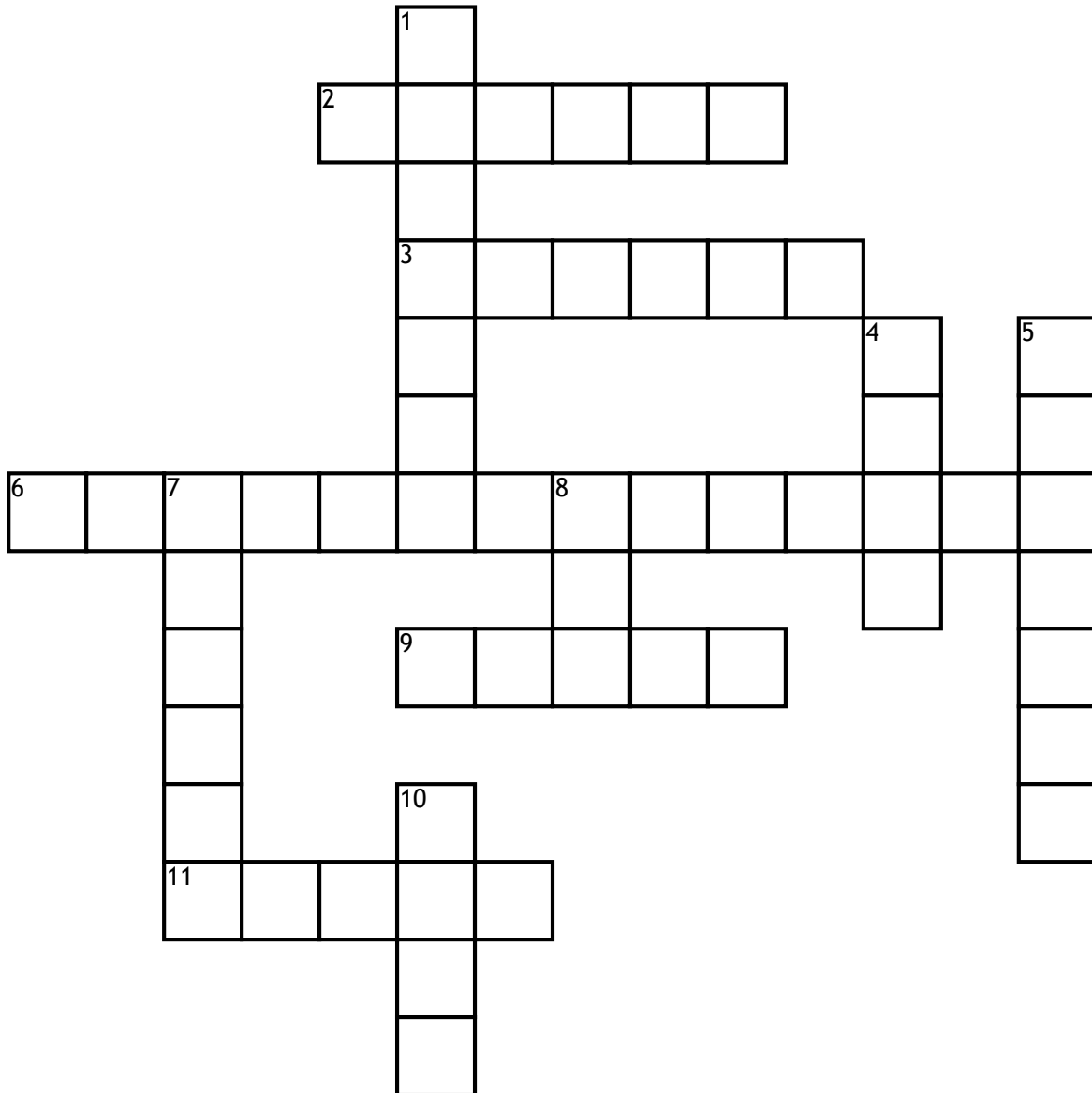


Name: _____

Date: _____

Wiiyow



Across

- 2. nose
- 3. eyebrow
- 6. eyes
- 9. knee
- 11. arms

Down

- 1. chin
- 4. mouth
- 5. face
- 7. neck
- 8. foot
- 10. leg