





Name \_\_\_\_\_

Kindergarten \_\_\_\_/\_\_\_\_



1. I have  head.



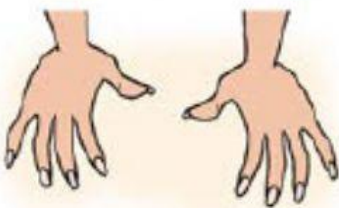
2. I have  nose.



3. I have  eyes.



4. I have  ears.



5. I have  hands.



6. I have  legs.

