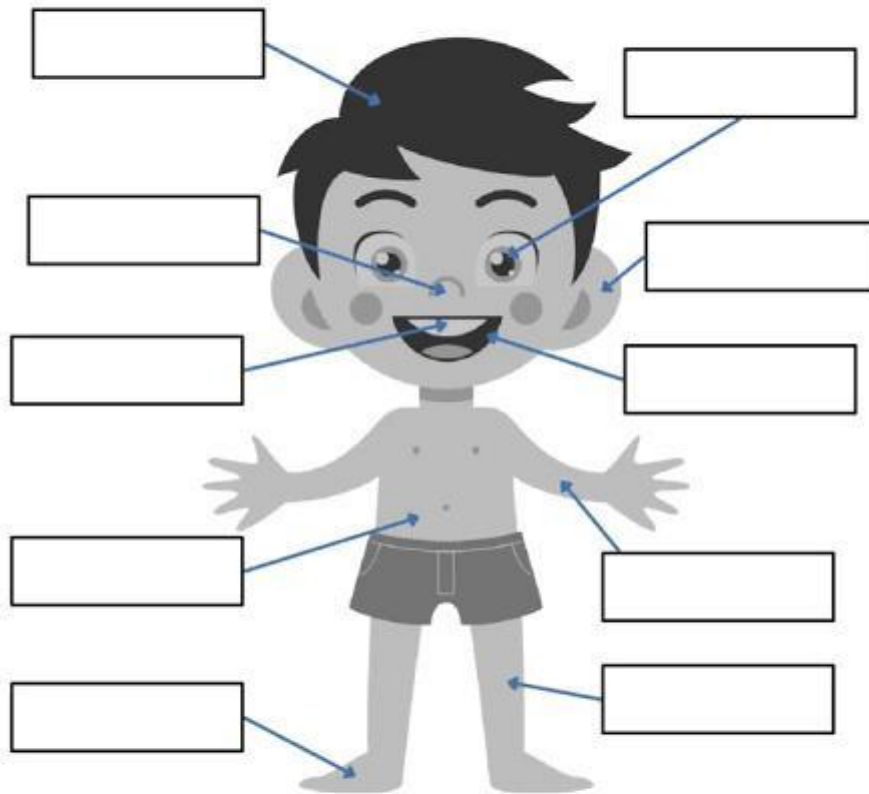


Name : \_\_\_\_\_

## Name the Body Parts

Fill the boxes using the words given below.



|      |      |         |       |       |
|------|------|---------|-------|-------|
| Head | Feet | Hand    | Ear   | Nose  |
| Eye  | Leg  | Stomach | Mouth | Teeth |