

Name:

Grade:

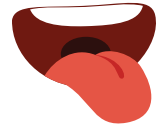
Date:

Match the parts of the body

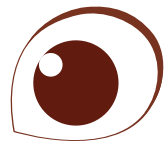
Mouth



Foot



Finger



Ear



Nose



Eye



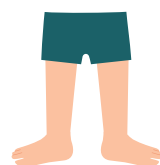
Leg



Hand



Tongue



Head

