Name: _____ Date: _____

human body

G S H N C U V G M W G L B S M V R S L D R B S F
S F T W U A V A L T S E A B N H A A E J B A T A
H G O Z D W F M Q K E G D P C U B O R Y J D M M
I Q O K M D L L I L V Z E A K Z H V T J E C W K
N S T L D Z X N D M R A M Y S Z M D N U K T T D
N H O B S M P S C B A O N C B J T V M Z H S H W
S J V Q D A E H U N T X B K H J E Y I U V E A D
E S C M T K X F I S I Z D E O F G C M L U E K R
H E L B O W L D M J W W W Q O N C B Y C M N U Z
S E T D I U F T E E T H D R D B I G S L L K O J
A S E O T Z T B S Y X G E N A T K D I Q I E B N
L I X J G H K H X A F H K W A T O O F E A A S V
E P G A Z J K M N C E Q I F L H V I Y Q N Y V D
Y X G I H A B K S A A R T E R B I K U T I G Y V
E A Y X X A L P D W Q T Y Y Q R N G B H I P Q H
T E E F Y E I Q O H R D F S R E V I L V F L U P
S J E D G H P R C S N Q D D N D A K J Y I B A T
J O E R T N B B N F V F F C L L W R L P T G Q O
S X A O G E R G I B T S N E N U H O S U J A P N
T A D U Y K R K H E F R M F X O Y U M V C W W G
S U V E Z L J Z C V C A L A V H K L N A P P T U
I O Q X R E G N I F Q E X E G S J M O T T O B E
R Y N K N E C K X O C H E S T E S O N N O N G R
W M A G R V H Y A O V O U L F O R I A H R S A D

eyelashes shoulder forehead stomach eyebrow bottom
finger tongue shinn ankle knees chest
thumb wrist elbow tooth teeth mouth
toes feet foot skin nail hand
neck chin lips ears nose eyes
hair head leg hip arm