

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

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