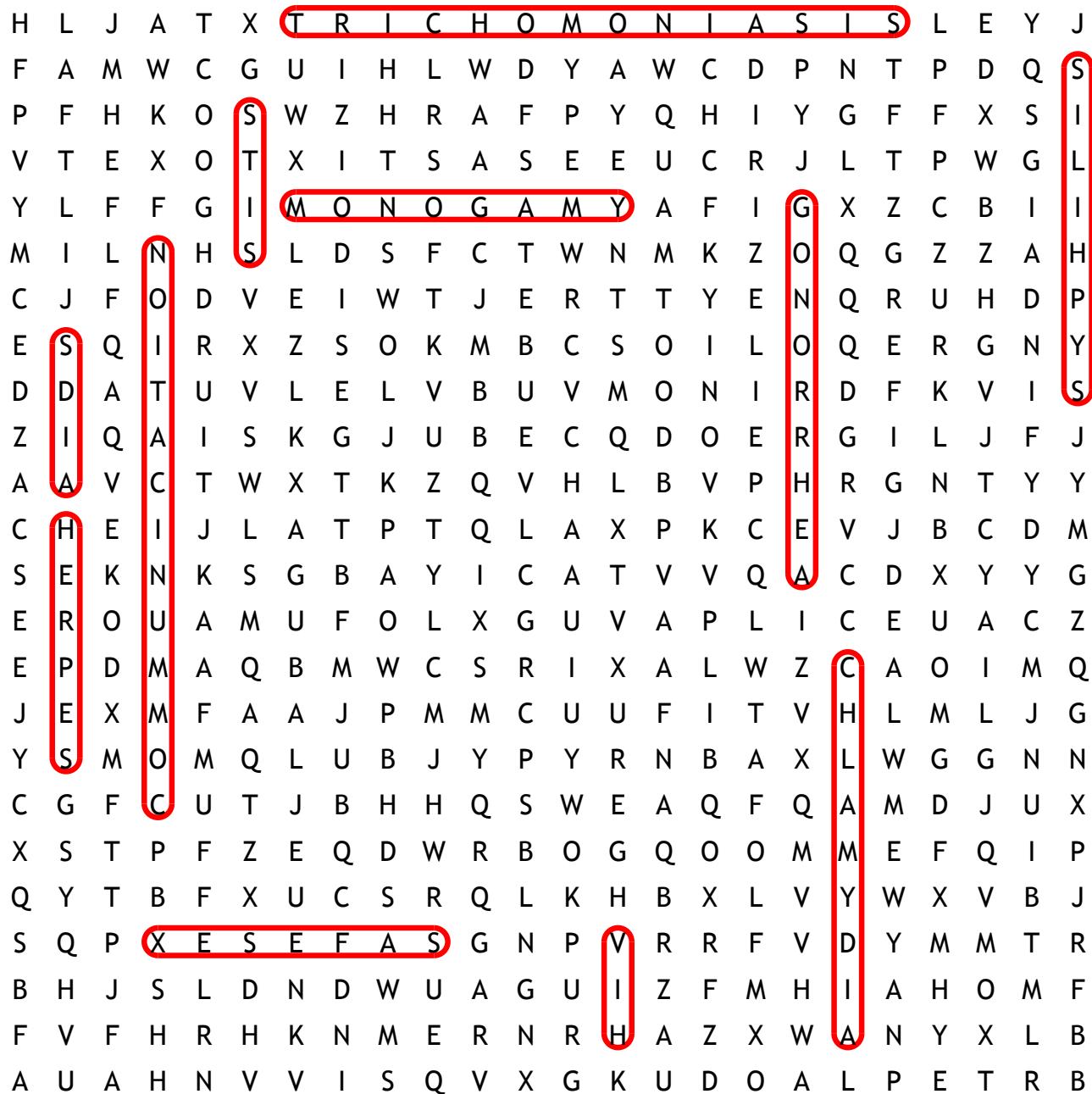


Name: _____

Date: _____

STD's & SAFE SEX



TRICHOMONIASIS

COMMUNICATION

CHLAMYDIA

GONORRHEA

MONOGAMY

SYPHILIS

SAFESEX

AID's

HERPES

STI's

HIV