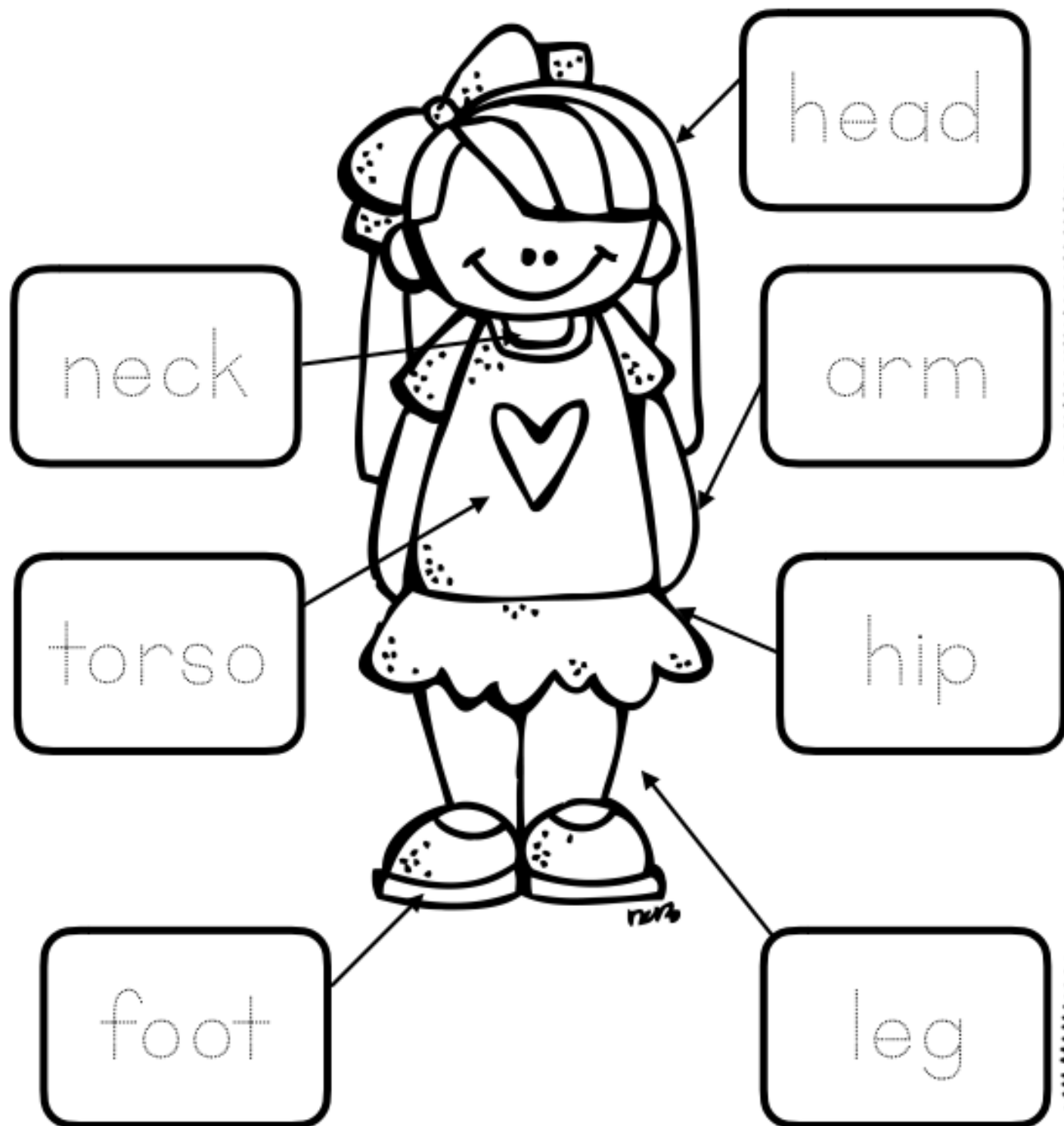


Name: _____

Parts of the Body



MY BODY PARTS!

I AM

EAR

EYE

NOSE

LEG

FOOT

ARM

SHOULDER

KNEE

MOUTH

FEET

BODY

HEAD

