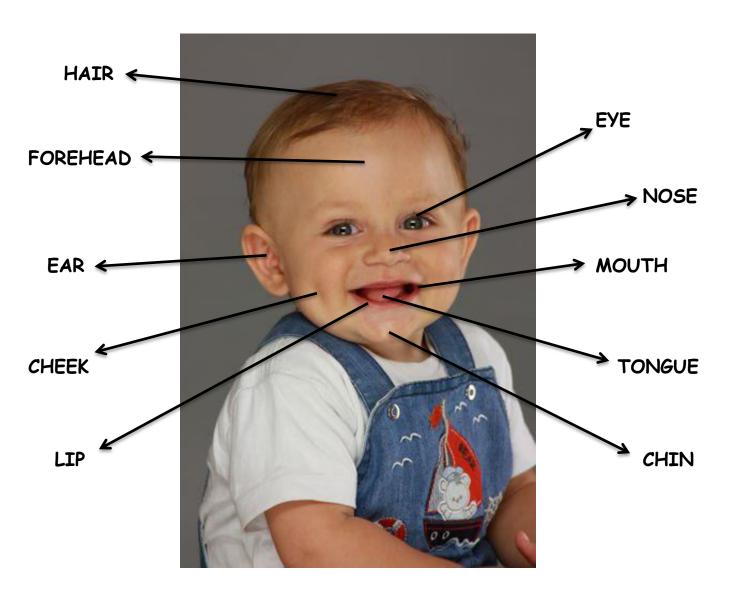
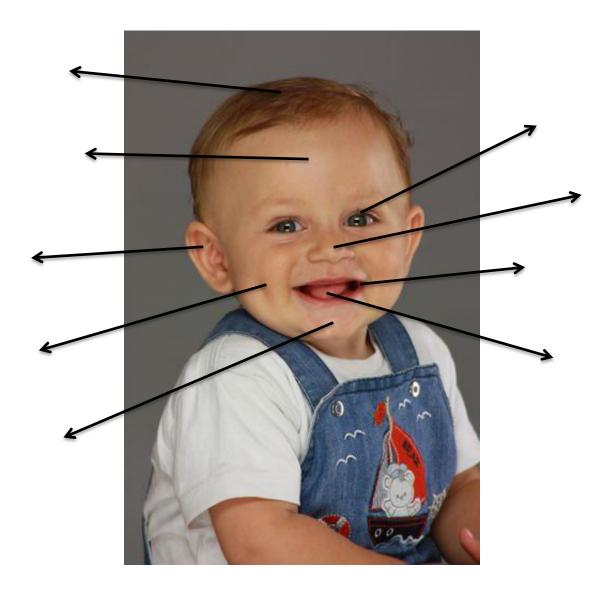
## OUR FACE



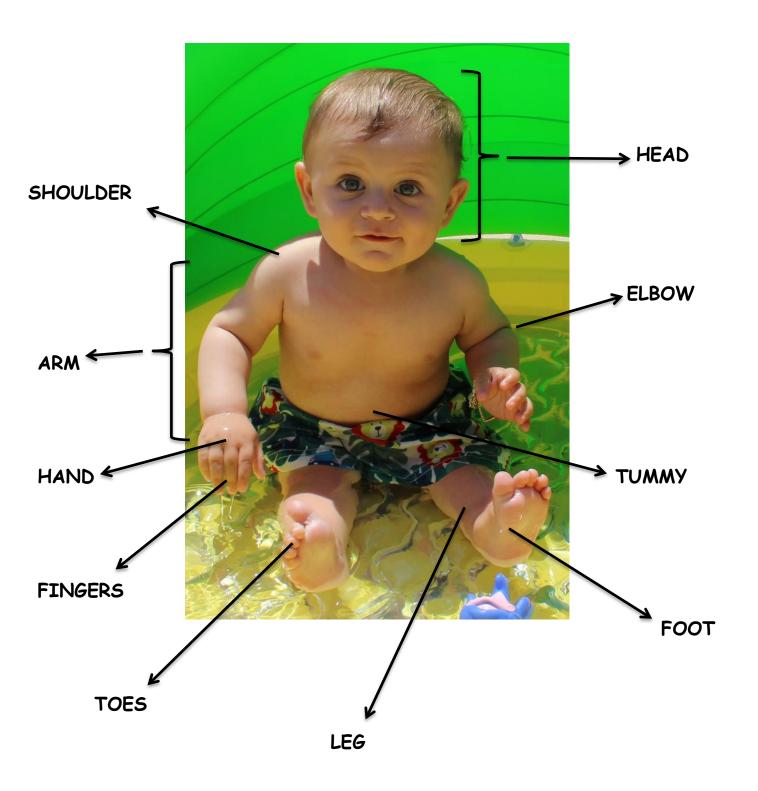
## OUR FACE

Fill in the blanks with the words in the chart.

Hair / eye / nose / mouth / forehead / ear / chin / cheek / tongue



## **BODY PARTS**



## **BODY PARTS**

Fill in the blanks with the words in the chart.

Shoulder / tummy / finger / hand / arm / elbow / head / toes / foot / leg

