

1

Label the parts of the body. Use the words in the box.

- | | | | |
|-------------------------------------|---------|--------------------------|----------|
| <input type="checkbox"/> | arm | <input type="checkbox"/> | leg |
| <input type="checkbox"/> | ear | <input type="checkbox"/> | mouth |
| <input type="checkbox"/> | elbow | <input type="checkbox"/> | neck |
| <input type="checkbox"/> | eye | <input type="checkbox"/> | nose |
| <input type="checkbox"/> | fingers | <input type="checkbox"/> | shoulder |
| <input type="checkbox"/> | foot | <input type="checkbox"/> | stomach |
| <input checked="" type="checkbox"/> | hair | <input type="checkbox"/> | teeth |
| <input type="checkbox"/> | hand | <input type="checkbox"/> | toes |

1. Hair

8. Eyes

9. Ear

10. Nose

11. Teeth

12. Shoulder

13. Elbow

14. Arm

15. Hand

16. Toes

2. Mouth

3. Neck

4. Stomach

5. Fingers

6. Leg

7. Toes

