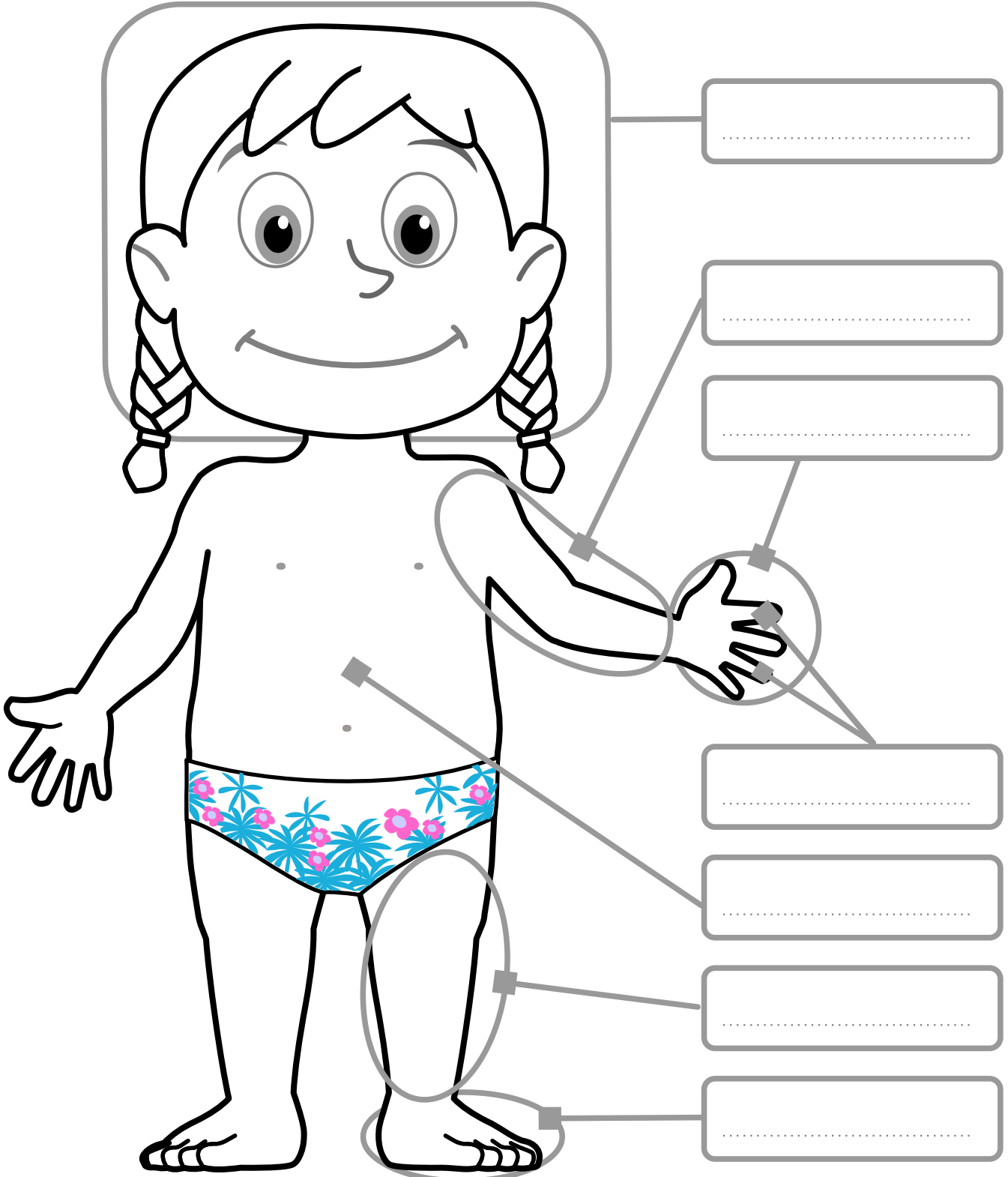


ACTIVIDAD: MI CUERPO

Nombre:

Fecha:

Escribe en los huecos: CABEZA, BRAZO, MANO, DEDOS, BARRIGA, PIE, PIERNA.

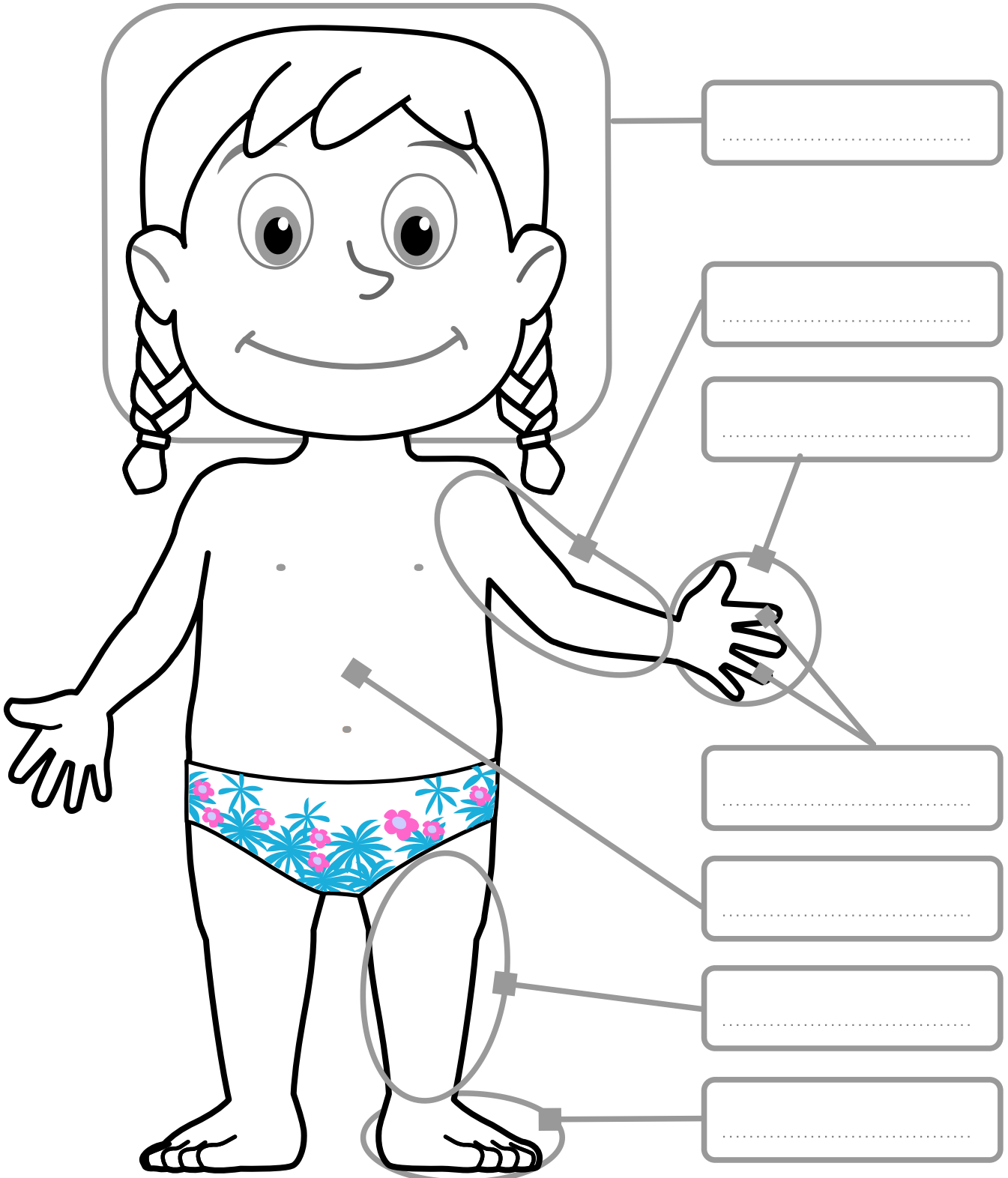


ACTIVITY: **MY BODY**

Name:

Date:

Color and label the parts of the body: HEAD, ARM, TUMMY, HAND, FINGERS, LEG, FOOT.

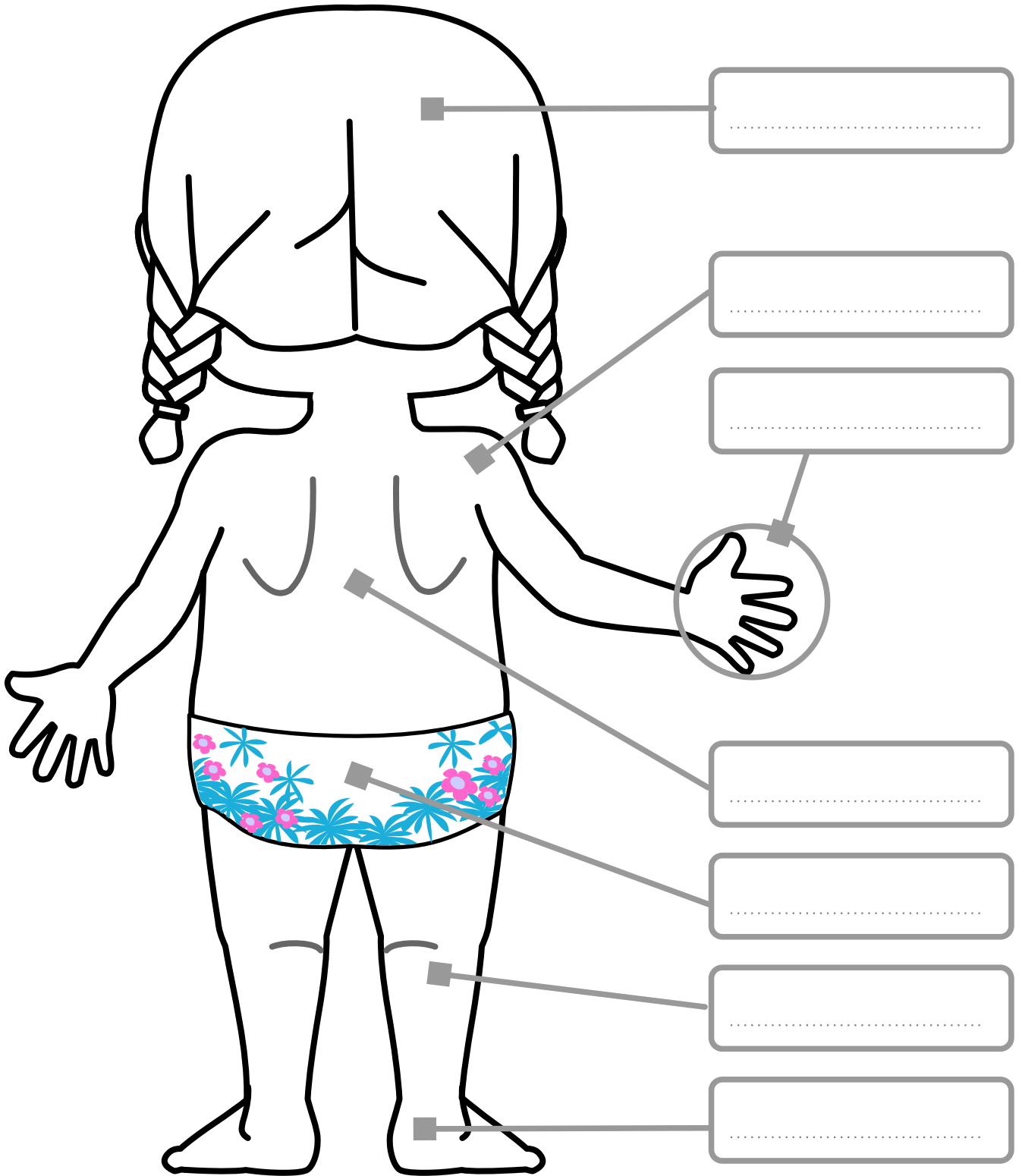


ACTIVIDAD: MI CUERPO

Nombre:

Fecha:

Escribe en los huecos: PELO, HOMBROS, ESPALDA, PIERNA, TALÓN, CULO, MANO.



ACTIVITY: **MY BODY**

Name:

Date:



Color and label the parts of the body: HAIR, LEG, SHOULDERS, HEEL, HAND, BACK, BOTTOM.

