

Name: _____ ()

Class: _____ Date: _____



Choose and write.

bang my head
burn my arm

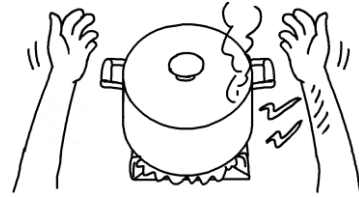
break my arm
cut my finger

break my leg
twist my ankle

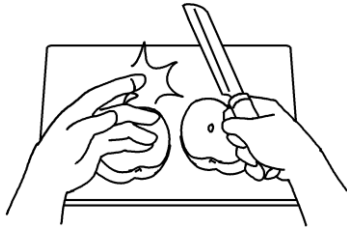
1



2



3



4



5



6



| | |
|---|-------|
| 1 | _____ |
| 2 | _____ |
| 3 | _____ |
| 4 | _____ |
| 5 | _____ |
| 6 | _____ |