



Name: _____

Date: _____

Using our 5 senses

Draw a line to match the senses to the pictures.



Hearing



Touch



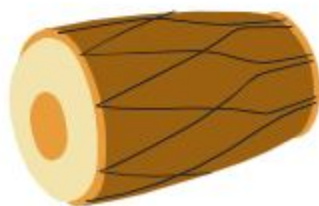
Taste



Smell



Sight



Answers

