

Subject _____

Name _____

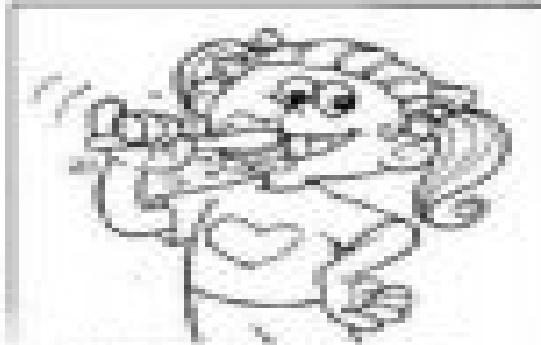
Class _____

Roll No. _____

Section _____

Teacher _____

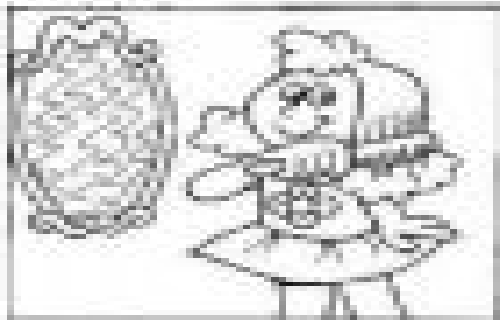
healthy habits



Brushing my teeth



Washing my hands



Combing my hair



Taking a shower