

NAME \_\_\_\_\_

DATE \_\_\_\_\_

## BRIDLE PARTS -

Color or Cut & Paste parts from sheet 2 or take the quiz below

B \_\_\_\_\_ B \_\_\_\_\_

T \_\_\_\_\_

L \_\_\_\_\_

C \_\_\_\_\_

P \_\_\_\_\_

N \_\_\_\_\_ B \_\_\_\_\_

S \_\_\_\_\_ B \_\_\_\_\_

