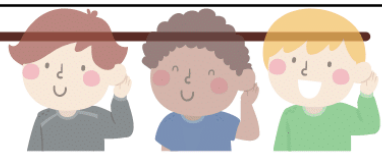


Student Name: _____

Teacher: _____

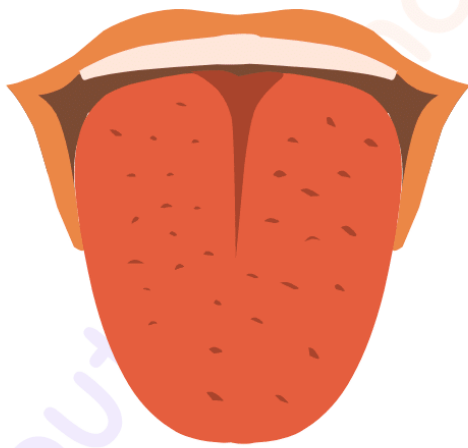
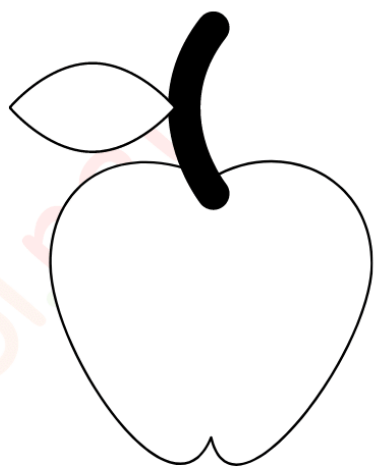
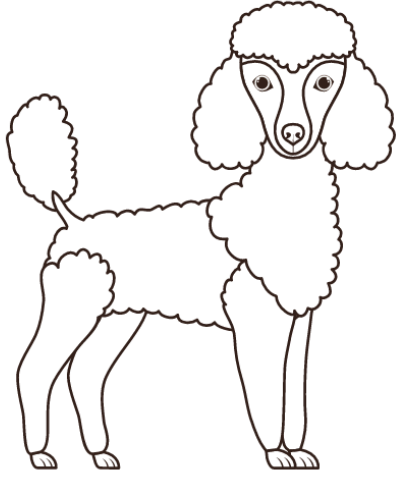
Class: _____

Date: _____

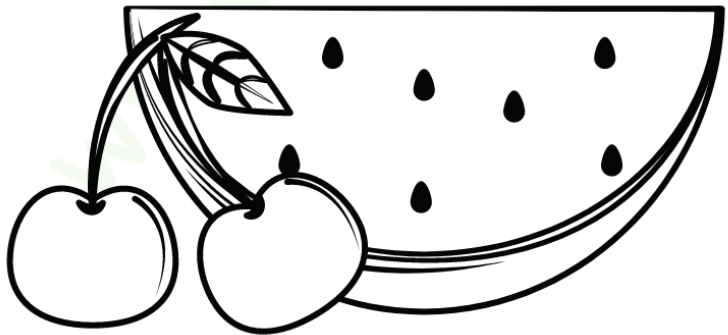
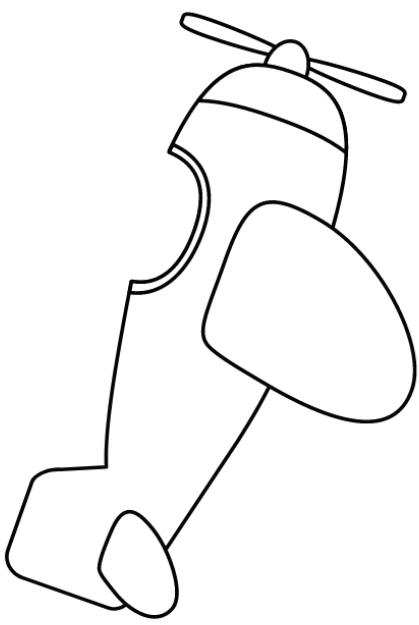


Sense Of Taste

Colour the things you can taste.



Taste



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