

Name: _____

Date: _____

Bathroom

Q Q P M J L J J P Y A T H Z Q J C
L N Q B Y B Q D E K V L O P F Q X
I B W F J I B A T H O R S M K N X
V V M K H N B S B J T E P B S L E
A X J G T N Y J F I T W O J E C I
T N W P E M F L B M P O N M S O P
Z R X M L P Z N I J L H G R U N C
S E A T I R M K E N Y S E N I D J
O Q H Z O B O W E R L E W O T I E
O E V K T L D I W U Q A T O G T I
P X M N D V I W U U P B V P Z I V
K B Z R J T M B R A A H G M R O J
N L G Y Z Y M U F S E S I A Y N Q
I U M O V M U G L O F F R H N E X
S X Z Q L K G U S W W U Q S Q R W
E X T F C M K N S O A P P X N C K
J R P X T B K V K W G I R J Q G L

CONDITIONER

SHAMPOO

TOILET

SPONGE

SHOWER

TOWEL

SINK

SEAT

SOAP

BATH

POO