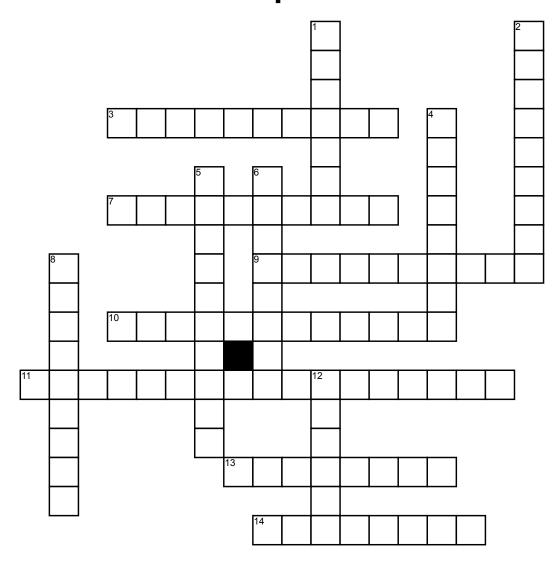
Name: ______ Date: _____

Deportes



15			

Across

- 3. Cycle
- 7. Swimming
- 9. Volleyball
- 10. Basketball
- 11. Football
- 13. Hockey

- 14. Soccer
- 15. Tennis

Down

- **1.** Ski
- 2. Baseball
- 4. Team

- 5. (female)
- Player
- 6. Ball
- 8. Bowling
- **12.** Golf