










Name: _____ Date: _____

MAP LEGEND

Cut the dashed line boxes and glue them under the correct symbols.

			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			
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- | | | | |
|-------------|---------------|--------------|---------------|
| Gas Station | Airport | Hospital | Bridge |
| Bus Stop | Train Station | Parking Area | Train Rail |
| House | Hotel | Restaurant | Grocery Store |