

Name: _____

1 Work in pairs. Ask questions and tick (✓) the boxes.

	Every day	Three times a week	Twice a week	Once a week	At the weekend	Don't
1 How often / watch TV?						
2 How often / play football?						
3 How often / go swimming?						
4 How often / do homework?						
5 How often / listen to music?						
6 How often / play basketball?						