

NAME : \_\_\_\_\_

DATE: \_\_\_\_\_

CLASS : \_\_\_\_\_

**2** Look at activity 1 and write.

The popcorn was



1.

The film was



2.

The film was



3.

The film was



4.

**3** Listen and tick (✓).



1.

a	<input type="checkbox"/>
---	--------------------------



b	<input type="checkbox"/>
---	--------------------------



2.

a	<input type="checkbox"/>
---	--------------------------



b	<input type="checkbox"/>
---	--------------------------



3.

a	<input type="checkbox"/>
---	--------------------------



b	<input type="checkbox"/>
---	--------------------------



4.

a	<input type="checkbox"/>
---	--------------------------



b	<input type="checkbox"/>
---	--------------------------

E-mail your answer to:  
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