

# UNIT 16 Movies

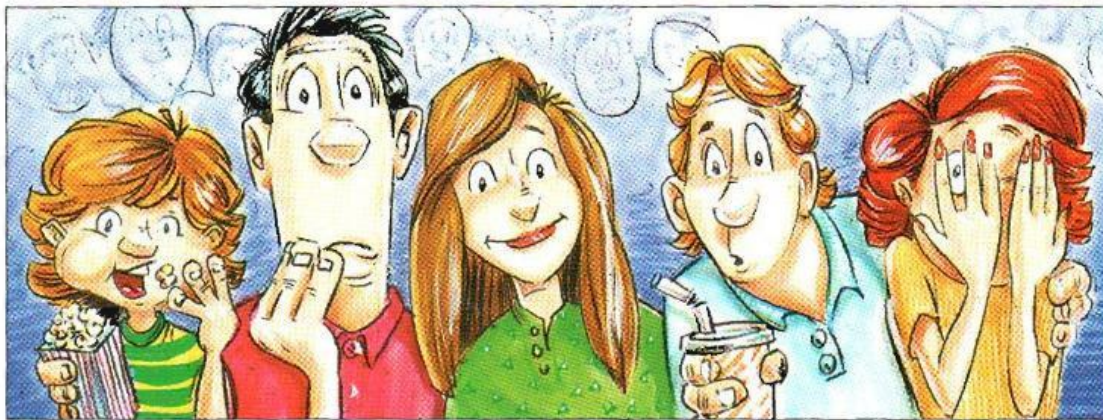
## 1. Getting Ready

What kinds of movies do you like? Check (✓) your answers and compare them with a partner. Add one more kind of movie to the list.

	Like a lot	Like a little	Don't like
animated movie	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
comedy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
horror	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
western	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
action	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
romance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
musical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 2. Let's Listen

These people are talking about movies. What kinds of movies do they like? Listen and check (✓) the correct answers.



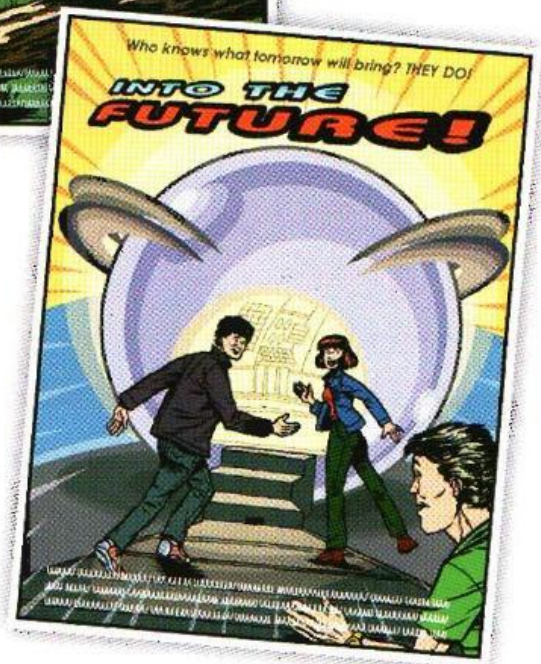
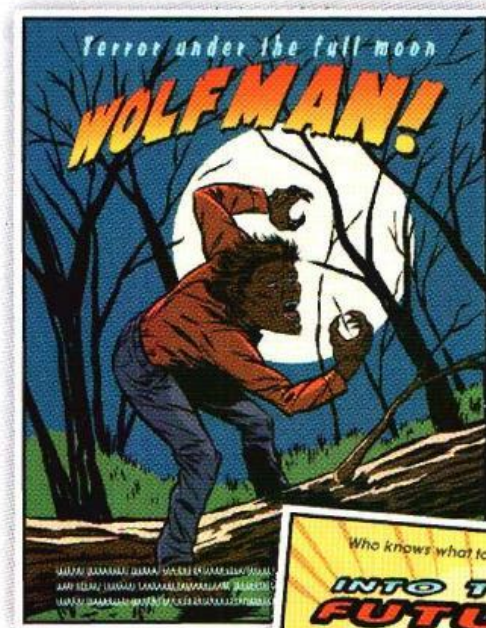
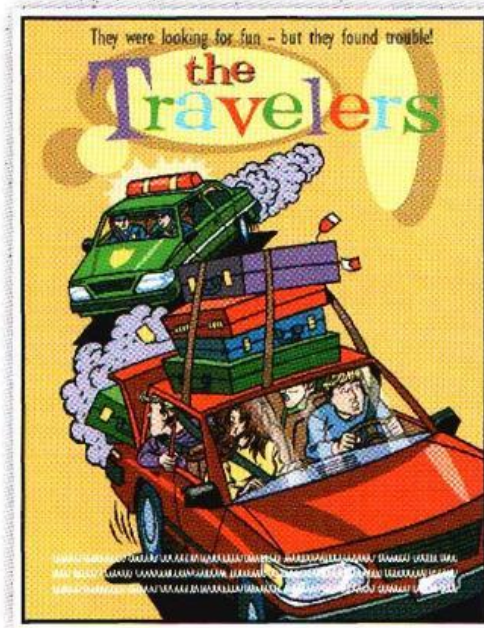
	Science fiction	Horror	Comedy	Western	Action
1. Sue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Bob	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Andrew	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Tina	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 3. Let's Listen

#### Task 1

Listen to people talking about movies. Check (✓) the kind of movie they describe.

	Science fiction	Horror	Comedy	Romance	Action
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



#### Task 2

Listen again. Do you think the second speaker will see the movie or not? Check (✓) the correct answer.

	Will see it	Won't see it
1.	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="checkbox"/>	<input type="checkbox"/>
5.	<input type="checkbox"/>	<input type="checkbox"/>

## 4. Let's Listen

### Task 1

Listen to people talking about movies they have seen. Check (✓) what they liked about each movie.



	The actors	The story	The music	The special effects
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Task 2

Listen again. Where does each story take place? Write the correct letter.

1. \_\_\_      a. Kansas
2. \_\_\_      b. Africa
3. \_\_\_      c. San Francisco
4. \_\_\_      d. London

# Over to You: Movie survey

## Task 1

Answer the questions. Then add two questions of your own.

- 1. How often do you go to movies?  
(once a week, twice a month, three times a year) \_\_\_\_\_
- 2. What kind of movies do you like? \_\_\_\_\_
- 3. What kind don't you like? \_\_\_\_\_
- 4. Write the name of a movie you really loved. \_\_\_\_\_
- 5. Who were the stars in it? \_\_\_\_\_
- 6. Name an actor you really like. \_\_\_\_\_
- 7. Name an actress you really like. \_\_\_\_\_
- 8. Do you prefer going out to movies or watching videos at home? \_\_\_\_\_
- 9. What kind of movie would you like to star in? \_\_\_\_\_
- 10. Who would you choose to star with you? Why? \_\_\_\_\_
- 11. \_\_\_\_\_
- 12. \_\_\_\_\_



## Task 2

Work in groups of four. Ask each other the questions in the chart.