Time to: SHOW and TELL

My birth fact file!

Listen and practise!



Read and complete. Then, practise.

Photo Or Drawing	
Greetings:	
Name: (*Spelling*)	
Surname: (*Spelling*)	
Feeling:	
Age:	
Date of birth:	
Height:	
Weight:	
Time/place of birth:	
Thanks & farewell:	

Created by Sandra Fontes

LIVEWORKSHEETS