

**Preferences**

Date: \_\_\_\_\_

Interview 3 classmates about their after-school activities. Draw a smiley face (☺) for “Yes, I do” or a sad face (☹) for “No, I don’t” on the correct column in the grid.

Name	Sports	Dance Classes	Martial arts	Gymnastics	Swimming	Art Classes
1.						
2.						
3.						
4.						
5.						

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