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Materia: Ingles IV

Grado: 4°

Grupo: "B"

Workbook

How often do you exercise?

Om

1

Complete the chart. Use words from the box.
(Some of the words can be both individual sports and exercise.)

aerobics	football	swimming
baseball	jogging	tennis
basketball	stretching	volleyball
bicycling	soccer	yoga



Team sports	Individual sports	Exercise
baseball	Bicycling	Jogging
Basketball	Swimming	Stretching
Soccer	Aerobic	
Tennis		
Volleyball		
Yoga		
Football		



Om

2

Arrange these words to make sentences or questions.

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- go never I almost bicycling
I almost never go bicycling _____ .
- hardly they tennis play ever
They hardly tennis ever _____ .
- go do often jogging how you
How do you do often jogging _____ ?
- often mornings do on we yoga Sunday
we often Sunday morning on do yoga _____ .
- ever Charlie do does aerobics
Charlie does do ever aerobics _____ ?
- do on you what usually Saturdays do
What do you usually on Saturday _____ ?

3 Use these questions to complete the conversations.
 How often do you ... ? Do you ever ... ? What do you usually ... ?

1. A: Do you ever exercise?
 B: Yes, I often exercise on weekends.
2. A: _____
 B: Well, I usually do karate on Saturdays and yoga on Sundays.
3. A: _____
 B: No, I never go to the gym after work.
4. A: _____
 B: I don't exercise very often at all.
5. A: _____
 B: Yes, I sometimes play sports on weekends – usually baseball.
6. A: _____
 B: I usually play tennis in my free time.

4 Keeping fit?

A Check (✓) how often you do each of the things in the chart.

	Every day	Once or twice a week	Sometimes	Not very often	Never
do aerobics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
play basketball	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
exercise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
go jogging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
do karate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
play soccer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
go swimming	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
do weight training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

B Write about yourself using the information in the chart.
