

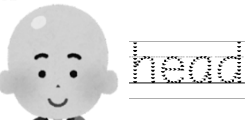
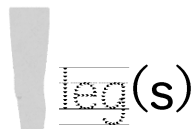
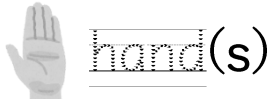
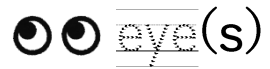
Name: _____ Class: _____



English Race (p. 74)

Let's Review!

<input type="checkbox"/> A: dentist = _____
<input checked="" type="checkbox"/> B: stomachache = 胃痛
<input type="checkbox"/> C: doctor = _____
<input type="checkbox"/> D: headache = _____
<input type="checkbox"/> E: fever = _____
<input type="checkbox"/> F: school nurse = 養護教諭
<input type="checkbox"/> G: toothache = _____
<input type="checkbox"/> H: medicine = _____



	1) <u>B</u>		5) _____
	2) _____		6) _____
	3) _____		7) _____
	4) _____		8) _____



five	ten	fifteen	twenty
twenty-five	thirty	thirty-five	forty
forty-five	fifty	fifty-five	sixty
sixty-five	seventy	seventy-five	eighty
eighty-five	ninety	ninety-five	one-hundred

How many coins did you get? (合計): _____

CHALLENGE (Tool Box on p. 74)

Please give them some advice!

<p>I have a pain here.</p>	<p>I have a fever.</p>