

These questions are not a test or an exam. This work will not be marked. Please write your answers under each question.

Q1. What do you have to drink before you come to school in the morning?

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Q2. What do you drink at school at:

Break time \_\_\_\_\_

Dinner time \_\_\_\_\_

Afternoon playtime \_\_\_\_\_

After school \_\_\_\_\_

Q3. What do you drink with your evening meal at home?

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Q4. If your school had a water fountain to drink from, would you use it?  
(Please tick a box)

YES	<input type="checkbox"/>
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NO	<input type="checkbox"/>
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Q5. Do you drink water? (Please tick a box)

YES	<input type="checkbox"/>
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NO	<input type="checkbox"/>
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