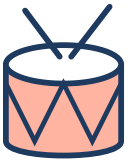
Safe or not safe?

Name _____

Date _____

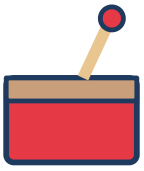
Put a ✓ if it is **safe**. Put a × if it is **not safe**.

scissors ☐



drum ☐

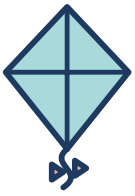
medicine ☐



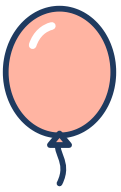
matches ☐

knife ☐

book ☐



kite ☐



balloon ☐