PHP FORM VALIDATION

ENTER NAME :
ENTER MAIL-ID :
CHOOSE GENDER : OMale OFemale
CREATE PASSWORD : Show Password
CONFIRM PASSWORD : Show Password
MOBILE NO. :
CHOOSE D.O.B : dd-mm-yyyy 🗊
ENTER ADDRESS :
CHOOSE LOCATION : Select •
Submit clear
ENTER NAME : vishwaathiga
ENTER MAIL-ID : vish@gmail.com
CHOOSE GENDER : ○ Male
CREATE PASSWORD : Show Password
CONFIRM PASSWORD: Show Password
MOBILE NO. : 123456 * Please enter a valid 10 digit mobile number

: dd-mm-yyyy 🖃 * Please enter your date of birth

Submit clear

: OMR chennai

CHOOSE D.O.B

ENTER ADDRESS

CHOOSE LOCATION : Chennai 🕶