```
<!DOCTYPE html>
<html>
       <head>
              <title>Asgn1_Form</title>
              <style type="text/css">
                     * {
                     margin: 0;
                     padding: 0;
                     body {
                     background-image:url(Blog-1.png);
                     background-position:center;
                     background-size:cover;
                     font-family:sans-serif;
                     margin-top:40px;
                     .regform{
                     width: 800px;
                     background-color:rgb(0,0,0,0.6);
                     margin:auto;
                     color:#FFFFFF;
                     padding:10px 0px 10px 0px;
                     text-align: center;
                     border-radius: 15px;
                     }
                     .main{
                     background-color:rgb(0,0,0,0.5);
                     width: 800px;
                     margin: auto;
                     }
                     form{
                     padding: 10px;
              </style>
       </head>
       <body>
       <div class="regform">
                            <center>
                     <h1> Registration Form </h1> </center>
       </div>
              <div class="main">
                     <form method="post">
                     <center>
                     <label
for="name">Name:</label>
                                   <input id="name" type="text"</pre>
name="Name" placeholder="Enter Name" required>
```

```
<label
for="email">Email:</label>
                                  <input id="email"</pre>
type="email" name="email" placeholder="Enter Email" required>
                                  <label
for="address">Address:</label>
                                  <textarea id="address"
name="address" rows="4" cols="50" placeholder="Enter Address"
required></textarea>
                                  <label
for="gender">Gender:</label>
                                  <input type="radio"</pre>
id="gender" name="gender" value="male">Male</input>
                                         <input type="radio"</pre>
id="gender" name="gender" value="female">Female</input>
                                  <label
for="subjects">Cources Opted:</label>
                                  <input type="checkbox"</pre>
id="maths" name="maths" value="maths">
                                         <label>Maths</label><br>
                                         <input type="checkbox"</pre>
id="biology" name="biology" value="biology">
                                         <label>Biology</label><br>
                                         <input type="checkbox"</pre>
id="physics" name="physics" value="physics">
                                         <label>Physics</label><br>
                                         <input type="checkbox"</pre>
id="chemistry" name="chemistry" value="chemistry">
                                         <label>Chemistry</label><br>
```

```
<label
for="languages">Choose Language Subject:</label>
                                  <select name="language"</pre>
id="language">
                                                <option
value="English">English</option>
                                                <option</pre>
value="Hindi">Hindi
                                                <option</pre>
value="French">French</option>
                                                <option</pre>
value="Korean">Korean</option>
                                         </select>
                                  >
                                         <input type="submit"</pre>
name="submit">
                                  </center>
                    </form>
             </div>
       </body>
</html>
```