```
9921103163
Nitin cahudahry
F7
Form Validation Lab
Code-
<html>
  <head>
    <title>
      Form Validation code by nitin chaudhary
    </title>
    <script>
function validateform(){
var ui=document.getElementById("userid");
var password=document.myform.password.value;
var name=document.getElementById("nm");
if(name!=""){
 for(i=0;i<name.length;i++){</pre>
if((name[i]>=65&&name[i]<=91)||(name[i]>=97&&name[i])<123)co
ntinue;
    else {
      alert("Name must contain only alphabets");
      return false;
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}
  }
}else if(password.length<7||password.length>12){
 alert("Password must be at least 6 characters long.");
 return false;
}
else if(ui.length<5||ui.length>12){
  alert("user id lengh should be 5 to 12 characters");
  return false;
}
else{
  return true;
}
}
    </script>
  </head>
  <body>
    <h1>Registration Form</h1>
    <form name="myform" action="valid.html" method="post"
onsubmit="return validateform()">
      User id:
      <input type="text" id="userid" required><br><br>
      Password:
      <input type="password" id="Pass" required><br><br>
```

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Name:
      <input type="text" id="nm" required><br><br>
      Address:
      <input type="text"><br><br>
      <label for="Country">Country:</label>
      <select name="country" id="con">
       <option value="null">(Please select a country)
       <option value="india">India</option>
       <option value="china">China</option>
       <option value="pakistan">Pakistan
       <option value="bhutan">Bhutan
       <option value="nepal">Nepal</option>
      </select><br>>
      ZIP Code:
      <input type="number" id="code" required><br><br>
      Email:
      <input type="text" id="email" required><br><br>
      Sex:
      <input type="radio" id="Male" name="sex" value="Male"
required>
      <label for="Male">Male</label>
      <input type="radio" id="Female" name="sex"
value="Female">
      <label for="Female">Female</label>
```

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<input type="radio" id="Others" name="sex"
value="Others" required>
      <label for="Otehrs">Others</label><br><br></label></label>
      Language:
       <input type="checkbox" id="english" value="English"</pre>
required>
      <label for="english">English</label>
      <input type="checkbox" id="nonEnglish" name="nonenglish"</pre>
value="NonEnglish">
      <label for="nonEnglish">Non English</label><br><br>
      About:
      <input type="textbox" id="about" ><br><br>
      <input type="submit" onClick="myFunction()"/>
  <script>
   function myFunction() {
    window.location.href="http://127.0.0.1:5500/satyam2.html";
   }
  </script>
    </form>
  </body>
</html>
Output-
```

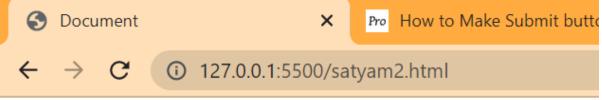
Registration Form

| User id: |
|--------------------------------------|
| Passwo Please fill out this field. |
| Name: |
| Address: |
| Country: (Please select a country) ✓ |
| ZIP Code: |
| Email: |
| Sex: O Male O Female O Others |
| Language: English Non English |
| About: |
| Submit |



Registration Form

| User id: 9921103163 |
|-----------------------------------|
| Password: ••••• |
| Name: Nitin Chaudhary |
| Address: Hathras |
| Country: India |
| ZIP Code: 204213 |
| Email: nitinchaudhary7290@gmail |
| Sex: ● Male ○ Female ○ Others |
| Language: ✓ English □ Non English |
| About: I like to study |
| Submit |
| |
| |



Your form is successfully submitted