registration.php

<!DOCTYPE html>

<html>

<head>

<meta name="viewport" content="width=device-width, initial-scale=1">

<style>

body{

  font-family: Calibri, Helvetica, sans-serif;

}

.container {

    padding: 50px;

}

input[type=text], input[type=password], textarea {

  width: 100%;

  padding: 15px;

  margin: 5px 0 22px 0;

  display: inline-block;

  border: none;

  background: #f1f1f1;

}

input[type=text]:focus, input[type=password]:focus {

  background-color: orange;

  outline: none;

}

 div {

            padding: 10px 0;

         }

hr {

  border: 1px solid #f1f1f1;

  margin-bottom: 25px;

}

.registerbtn {

  background-color: #4CAF50;

  color: white;

  padding: 16px 20px;

  margin: 8px 0;

  border: none;

  cursor: pointer;

  width: 100%;

  opacity: 0.9;

}

.registerbtn:hover {

  opacity: 1;

}

body {

  background-image: url('https://w0.peakpx.com/wallpaper/463/467/HD-wallpaper-pets-pet-kittten-caine-cat-pisici-animal-dog-puppy.jpg');

  background-repeat: no-repeat;

  background-attachment: fixed;

  background-size: cover;

}

</style>

</head>

<body>

<form method="post" action="register.php">

  <div class="container">

  <center>  <h1> Vet Ventures Registeration Form</h1> </center>

  <hr>

  <h3>OWNER'S DETAILS</h3>

  <label><b> OwnerName</b> </label>

<input type="text" name="OwnerName" placeholder= "Ownername" size="25" required />

<div>

<label><b>

Sex :

</b></label>

<input type="radio" value="Male" name="Sex" checked > Male

<input type="radio" value="Female" name="Sex"> Female

<input type="radio" value="Other" name="Sex"> Other

  </div>

<label>  <b>

Phone :

</b></label>

<input type="text" name="Phone" placeholder="phone" size="10"/ required>

<label><b>

CurrentAddress :

</b></label>

<textarea cols="80" rows="5"  name="CurrentAddress"placeholder="Current Address" value="address" required>

</textarea>

 <label for="email"><b>Email</b></label>

 <input type="text" placeholder="Enter Email" name="Email" required>

    <label for="psw"><b>Password</b></label>

    <input type="password" placeholder="Enter Password" name="Password" required>

    <label for="psw-repeat"><b>RetypePassword</b></label>

    <input type="password" placeholder="Retype Password" name="RetypePassword" required>

    <h3> PET'S DETAILS:</h3>

    <label><b> PetName: </b></label>

<input type="text" name="PetName" placeholder="PetName" size="15" required />

<label><b>

</b>Species:

</label>

<select name="Species">

<option value="Species">Species</option>

<option value="DOG">DOG</option>

<option value="CAT">CAT</option>

<option value="BIRD">BIRD</option>

<option value="RABBIT">RABBIT</option>

<option value="CATTLE">CATTLE</option>

</select><br>

<label><b> Breed </b> </label>

<input type="text" name="Breed" placeholder="Breed" size="25"required />

<div>

<label><b>

Gender :

</b></label>

<input type="radio" value="Male" name="Gender" checked > Male

<input type="radio" value="Female" name="Gender"> Female

</div>

<label><b> Colour</b></label>

<input type="text" name="Colour" placeholder="Colour" size="25"required />

<div>

<label> <b>sterilised:</b></label>

<input type="radio" value="yes" name="sterilised" checked > Yes

<input type="radio" value="No" name="sterilised"> No

</div>

<label><b>VisitingReasons</b></label>

<textarea cols="80" rows="5" name="VisitingReasons" placeholder="reasons" value="reasons" >

</textarea>

<label><b>medicalconditions</b></label>

<textarea cols="80" rows="5" name="medicalconditions" placeholder=""  ></textarea>

<div>

    <p><label for="questions"><b>Hintquestions(For security purpose)</b></label></p>

      <select name="Hintquestions" class="form-control">

                                    <option name="Hintquestions" value="In which city or town was your first job?">In which city or town was your first job?</option>

                                    <option  name="Hintquestions"value="What is your favourite colour?">What is your favourite movie?</option>

                                    <option  name="Hintquestions"value="what was your first car?">what was your first car?</option>

                                    <option  name="Hintquestions"value="what was your favourite school teachers name?">what was your favourite school teachers name?</option>

        </select>

</div>

<div>

    <p><b><label for="answer">Answer</label></b></p>

      <input type="text" name="Answer" id="answer">

</div>

<button type="submit" class=".btn-success">Register</button>

</form>

</body>

</html>

Register.php(database)

<?php

include("config.php");

$OwnerName = $\_REQUEST['OwnerName'];

$Sex = $\_REQUEST['Sex'];

$Phone= $\_REQUEST['Phone'];

$CurrentAddress = ($\_REQUEST['CurrentAddress']);

$Email= $\_REQUEST['Email'];

$Password = md5($\_REQUEST['Password']);

$RetypePassword = md5($\_REQUEST['RetypePassword']);

$PetName = $\_REQUEST['PetName'];

$Species= $\_REQUEST['Species'];

$Breed = $\_REQUEST['Breed'];

$Gender = $\_REQUEST['Gender'];

$Colour = $\_REQUEST['Colour'];

$sterilised= $\_REQUEST['sterilised'];

$VisitingReasons = $\_REQUEST['VisitingReasons'];

$medicalconditions = $\_REQUEST['medicalconditions'];

$Hintquestions = $\_REQUEST['Hintquestions'];

$Answer= $\_REQUEST['Answer'];

if($Password === $RetypePassword)

{

 $ins = "insert into register (`OwnerName`,`Sex`,`Phone`,`CurrentAddress`,`Email`,`Password`,`RetypePassword`,`PetName`,`Species`,`Breed`,`Gender`,`Colour`,`sterilised`,`VisitingReasons`,`medicalconditions`,`Hintquestions`,`Answer`) values ('$OwnerName' , '$Sex' ,'$Phone','$CurrentAddress', '$Email' , '$Password' , '$RetypePassword', '$PetName' , '$Species', '$Breed','$Gender','$Colour','$sterilised','$VisitingReasons','$medicalconditions','$Hintquestions','$Answer')";

}

else

{

    echo "password and cpassword not matched";

}

if($ins\_rs = mysqli\_query($con, $ins))

{

    ?>

    <script>

        window.location.href="homepage.php";

    </script>

    <?php

}

else

{

    echo "failed";

}

?>