HTML FORM

```
Code:
<html>
<center>
<head>
<style>
.form{
width: 25%;
.topsec {
background-color: #a9dce3;
text-align: left;
padding-left: 1rem;
padding-top: 0.01rem;
padding-bottom: 0.01rem;
.midsec {
background-color: #7689de;
text-align: left;
padding-bottom: 1rem;
}
.bottomsec{
background-color: #a9dce3;
padding-top: 0.6rem;
padding-bottom: 0.6rem;
}
.row{
color: white;
margin-left: 6rem;
padding-top: 1rem;
}
.button {
background-color: #7689de;
border: none:
color: white;
padding: 10px 32px;
text-align: center;
text-decoration: none;
display: inline-block;
}
.button1 {
background-color: red;
border: none;
color: white;
padding: 10px 32px;
text-align: center;
```

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text-decoration: none;
display: inline-block;
}
</style>
</head>
</center>
<body>
<center>
<form class="form">
<div class="topsec">
<h2>Sign Up</h2>
</div>
<div class="midsec">
<div class="row">
First Name:
<input type="text" placeholder="Enter First Name">
</div>
<div class="row">
Last Name:
<input type="text" placeholder="Enter Last Name">
</div>
<div class="row">
Date of Birth:
<input type="date" id="birthday" name="birthday">
</div>
<div class="row">
Gender:
<input type="radio" id="male">
<label for="male">Male</label>
<input type="radio" id="female">
<label for="female">Female</label>
</div>
<div class="row">
Email:
<input type="email" id="email" name="email" placeholder="Enter your email">
</div>
<div class="row">
Phone Number:
<input type="text" placeholder="Enter your phone number">
</div>
<div class="row">
Password:
<input type="password">
</div>
<div class="row">
Confirm Password:
<input type="password">
```

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</div>
<div class="row">
<input type="checkbox" id="agreement" value="agreement">
<label for="agreement"> I Agree to the Terms and Conditions.</label>
</div>
</div>
<div class="bottomsec">
<input type="button" class="button" onclick="alert('Form Submitted!')" value="Submit">
<input type="button" class="button1" onclick="alert('Form Cancelled!')" value="Cancel">
</div>
</div>
</form>
</center>
</body>
</html>
```

Screenshot:

