HTML FORM

```
Code:
<!DOCTYPE html>
<html lang="en">
<head>
<meta charset="UTF-8" />
<meta name="viewport" content="width=device-width, initial-scale=1.0" />
<title>Event Registration</title>
<style>
:root {
--primary: #ceb2f7;
--light: #212121;
--dark: #f5f5f5;
}
body {
background-color: var(--dark);
}
div {
width: 100%;
}
form {
max-width: 600px;
margin: 0 auto;
background-color: var(--light);
h1 {
margin: 0;
padding: 1rem;
color: white;
.form-control {
padding: 1rem;
}
label.
p {
display: block;
width: 550px;
padding-bottom: 0.4rem;
color: var(--primary);
```

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font-weight: 600;
}
p {
margin: 0;
padding: 1rem;
}
.padded-input {
padding: 0.25rem;
}
.radio-checkbox-label {
display: inline-block;
color: var(--dark);
font-weight: initial;
}
.button-container {
padding: 0.8rem;
margin-left: 22.5rem;
display: flex;
}
.button {
color: var(--light);
padding: 0.8rem 1.6rem;
cursor: pointer;
outline: none;
border: none;
font-weight: 600;
margin-left: 0.8rem;
}
input[type="submit"] {
background-color: var(--primary);
color: var(--light);
}
</style>
</head>
<body>
<form method="POST">
<div>
<h1>Virtual Event Registration Form</h1>
About this Virtual Event <br>
```

Topic: Working from Home Success

Date: May 05-06, 2021

Time: 9:00 AM - 1:00 PM

In this virtual event, we'll talk about success stories of work at home people. We'll discuss how did they get started, what are the needed tools, how much information or knowledge required to start, and many more.

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</div>
<div class="form-control">
<label for="name">Name</label
><input
type="text"
id="name"
name="name"
placeholder="John Wick"
required
autofocus
class="padded-input"
/>
</div>
<div class="form-control">
<label for="age">Age</label
><input
type="number"
id="age"
name="age"
required
autofocus
class="padded-input"
/>
</div>
<div class="form-control">
<label for="gender">Gender</label>
<div>
<input
type="radio"
name="sleeve"
id="male"
value="male"
/>
<label for="male" class="radio-checkbox-label"
>Male</label
>
</div>
```

<div>

```
<input
type="radio"
name="sleeve"
id="female"
value="female"
/>
<label for="female" class="radio-checkbox-label"
>Female</label
</div>
</div>
<div class="form-control">
<label for="email">Email/label
><input
type="email"
id="email"
name="email"
placeholder="john@wick.com"
required
class="padded-input"
/>
</div>
<div class="form-control">
<label for="phone">Phone/label
><input
type="tel"
id="phone"
name="phone"
placeholder="1234567890"
pattern="[0-9]{10}"
required
class="padded-input"
/>
</div>
<div class="form-control">
<label for="date">Event Date/label
><input type="date" id="date" name="date" class="padded-input" min="2021-05-05"
max="2021-05-06" />
</div>
<div class="form-control">
<label for="design">Proof of Identity</label</pre>
><input type="file" id="design" name="design" accept="image/*" />
```

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</div>
<div class="form-control">
<label for="payment">Payment Method</label>
<select name="payment" id="payment" class="padded-input">
<option value="" selected disabled hidden>Select a method
<option value="creditcard">Credit Card</option>
<option value="paypal">PayPal</option>
<option value="wiretransfer">Wire Transfer</option>
</select>
</div>
</div>
<div class="button-container">
<input type="reset" value="Reset" class="button" />
<input type="submit" value="Submit" class="button" />
</div>
</form>
</body>
</html>
```

Screenshot:

