Side Nav	Logo
Progress Bar	
	Login Link
Register Title w/ text	
Subscripti	on Package Subscription Package
Next	
	Register Form Title First Name Last Name Email Address Phone Number
Gender Field	Gender Field Gender Field
D.O.B.	D.O.B. D.O.B.
Disability Enquiry  No (Selected)  Yes  Next	
Confirm Details Subsctiption Choice	
Next	
Billing Info  Card Payment	
Pay/Register	

Footer