

ASSIGNMENT -1

```
<!DOCTYPE html>
<html>
  <head>
    <title>User Registration Form</title>
    <style>
      body{
        background-color:yellow;
        font-family:'Times New Roman';
        text-align: center;

      }
      form{
        background-color:Red;
        max-width:500px;
        padding:30px;
        margin-left: 500px;
        margin-right: 200px;

      }
    </style>
  </head>
  <body >
    <h1>Details</h1>
    <form id="form">
      <div class="form-control">
        <label for="Name" id="label-name">Name:</label>
        <input type="text" id="name" placeholder="Enter your name">
      </div><br>

      <div class="form-control">
        <label for="Email">Email:</label>
        <input type="text" id="Email" placeholder="Enter your Email">

      </div><br>

      <div class="form-control">
        <label for="contact no">Contact No:</label>
        <input type="text" id="contact" placeholder="Enter your Mobile no">
      </div><br>

      <div class="form-control">
```

```
    <label for="City">City:</label>
    <input type="text" id="City" placeholder="Enter your city">
</div><br>
```

```
<div class="form-control">
  <label for="state">state:</label>
  <input type="text" id="state" placeholder="Enter your state">
</div><br>
```

```
<div class="form-control">
  <label for="Country">Country:</label>
  <input type="text" id="Country" placeholder="Enter your country">
</div><br>
```

```
<button type="submit" value="submit">Submit</button>
```

```
</form>
</body>
</html>
```