

Date	18 November 2022
Team ID	PNT2022TMID18585
Project Name	Project – Global Sales Data Analytics

FEATURE 1: REGISTER

```
<!DOCTYPE html>
<html>

<head>
  <title></title>
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <link rel="stylesheet" type="text/css"
href="{{url_for('static',filename='style.css')}}">
  <link rel="stylesheet" href="https://cdnjs.cloudflare.com/ajax/libs/font-
awesome/4.7.0/css/font-awesome.min.css">
  <!-- jQuery library -->
  <script
src="https://ajax.googleapis.com/ajax/libs/jquery/3.2.1/jquery.min.js"></script>

  <!-- Latest compiled JavaScript -->
  <script
src="https://maxcdn.bootstrapcdn.com/bootstrap/3.3.7/js/bootstrap.min.js"></scrip
t>
  <script src="https://www.google.com/recaptcha/api.js" async defer></script>
  <style type="text/css">
    body{
      margin: 10px 10px 10px 100px;
      background-color: aliceblue;

    }

    .error {
      color: red;
    }

    .fm1 {
      text-align: center;
    }
  </style>
</head>
<body>
```

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        .lb1 {
            text-align: center;
            padding: 25px;
        }

        .lb2 {
            margin-left: 20px;
        }

        .lb3 {
            margin-right: 35px;
        }

        .container {
            display: block;
        }
        .k{
            border-radius: 15px;
        }
    </style>
</head>

<body>

    <?php
include 'header.php';
?>

    <div class="heading fix">
        <label class="lb1">REGISTRATION</label>
    </div>
    <div class="outerbox">
        <div class="fixedbox">
            <span class="content">
                <h4>Hello, Friend!</h4>
                <p>Enter your personal details and start journey with us</p>
            </span>
        </div>
        <div class="scrollbox">
            <div class="registerdonor">
                <form action="process.php" method="POST" id="myform">
                    <div class="login">
                        <h3>Login Details</h3>
                        <table class="fm1">

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        <tr>
            <td colspan="2">
                <label class="lb1" class="username">User
Name:-</label>
                <input type="text" name="user_name" required
pattern="^[A-Za-z0-9._%+@]{5,10}$"
                title="Enter a username between 5 to 10
letter" autocomplete="off">
            </td>
        </tr>
        <tr>
            <td>
                <label class="lb1">Full Name:-</label>
                <input type="text" name="user_full_name"
required pattern="[A-z ]+$"
                title="Use only character & whitespace"
autocomplete="off">
            </td>
        </tr>
        <tr>
            <td>
                <label class="lb1">Email Id:-</label>
                <input type="email" name="user_email"
required
                pattern="[A-Za-z0-9._%+-]+@[A-z0-9.-
]+\.[a-z]{2,}$"
                title="Email id is not Valid"
autocomplete="off">
            </td>
        </tr>
        <tr>
            <td>
                <label class="lb1">Password:-</label>
                <input type="password" name="password"
required
                pattern="(?=.*\d)(?=.*[a-z])(?=.*[A-
Z]).{6,}"
                title="Must contain at least one number
and one uppercase and lowercase letter, and at least 6 or more characters"
id="password" autocomplete="off">
            </td>
        </tr>
        <tr>
            <td>
                <label>Confirm Password:-</label>

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                                <input type="text" name="confirm_password"
required
                                pattern="(?=.*\d)(?=.*[a-z])(?=.*[A-
Z]).{6,}"
                                title="Must contain at least one number
and one uppercase and lowercase letter, and at least 6 or more characters"
                                id="confirm_password" autocomplete="off">
                                </td>
                            </tr>
                        </table>
                    </div>
                    <div class="container">
                        <h3>Contact Details</h3>
                        <table class="fm1">
                            <tr>
                                <td>
                                    <label>Mobile Number:-</label>
                                    <input type="text" name="user_number"
required pattern="^[1-9]{1}[0-9]{9}$"
                                    title="Number is not valid"
                                    autocomplete="off">
                                </td>
                            </tr>
                            <tr>
                                <td>
                                    <label class="lb1">Pincode</label>
                                    <input type="text" name="pincode" required
pattern="^[0-9]{6}$"
                                    title="Pincode is not valid"
                                    autocomplete="off">
                                </td>
                            </tr>
                            <tr>
                                <td rowspan="1">
                                    <label class="lb1">Address:-</label>
                                    <textarea name="Address" placeholder="follow
with pincode" required></textarea>
                                </td>
                            </tr>
                            <!-- <tr>
                                <td>
                                    <label class="lb1">City:-</label >
                                    <input type="text" name="city">
                                </td>
                            </tr>
                        </table>
                    </div>

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        </tr> -->
        <tr>
            <td>
                <label class="lb1">State:-</label>
                <input type="text" name="state">
            </td>
        </tr>
    </table>
</div>
<div class="personal">
    <h3>Personal Details</h3>
    <table class="fm1">
        <tr>
            <td>
                <label>Date Of Birth:-</label>
                <input type="date" name="date_of_birth"
required autocomplete="off">
            </td>
        </tr>
        <tr>
            <td>
                <div class="radio">
                    <label class="lb3">Gender:-</label>
                    <input type="radio" name="gender"
class="radio1" value="Male"><span
                        class="radioname" required
autocomplete="off">Male</span>
                    <input type="radio" class="radio2"
name="gender" value="Female"><span
                        class="radioname" required
autocomplete="off">Female</span>
                </div>
            </td>
        </tr>
        <tr>
            <td>
                <label class="lb1">Blood Group</label>
                <input type="text" list="bloodgroup"
name="blood_group" placeholder="----Select----"
                    required autocomplete="off">
                <datalist id="bloodgroup">
                    <option value="A+"></option>
                    <option value="A-"></option>
                    <option value="AB+"></option>
                    <option value="B+"></option>

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                <option value="B-"></option>
                <option value="O+"></option>
                <option value="O-"></option>
            </datalist>
        </td>
        <!-- <tr>
        <td>
            <label class="lb1">Plasma Type</label >
            <input type="text" list="plasmatype"
name="plasma_type" placeholder="----Select----"
                required autocomplete="off">
            <datalist id="plasmatype">
                <option value="Hot"></option>
                <option value="Warm"></option>
                <option value="Cold"></option>
                <option value="Ultra Cold"></option>
            </datalist>
        </td>
        </tr> -->
        <tr>
        <td>
            <label class="lb1">Weight In Kg :-</label>
            <input type="number" name="weight" required
autocomplete="off">
        </td>
        </tr>
    </table>
</div>

    <p class="lb2"><input type="checkbox" name="terms"
id="checkbox" required autocomplete="off">
        <!-- I agree to have my contact details broadcasted to
the registered donors of PGHS.net -->
        I agree that the above details are true </p>

    <input type="reset" class="lb2 k" name="submit"
value="Reset">

    <a href="login.html">
        <input type="button" class="lb2 k"
onclick="href='login.html';" value="Submit"></a>
    </div>
</form>
</div>

```

```

</div>
</div>

<!-- Responsive table -->
<div class="rregisterdonor">
    <form action="process.php" method="POST" id="myform">

</html>

```

OUTPUT:

registerer.html

File | C:/Users/THOM____96/Desktop/Ex%201.py/html/registerer.html

REGISTRATION

Hello, Friend!

Enter your personal details and start journey with us

Login Details

User Name:-

Full Name:-

Email Id:-

Password:-

Confirm Password:-

Contact Details

Mobile Number:-

Pincode

Address:-

State:-

Personal Details

Date Of Birth:-

Gender:- ☐ Male ☐ Female

Blood Group

Weight In Kg :-

LOGIN:

LOGIN.HTML:

```
<!DOCTYPE html>
<head>
<style>
form{
height:520px;
width:400px;
background-color: rgba(255,255,255,0.13);
position: absolute;
transform: translate(-50%,- 50%);
top: 50%;
left: 50%;
border-radius: 15px;
backdrop-filter: blur(10px);
border: 2px solid rgba(90, 76, 156, 0.1);

box-shadow: 0 0 40px
rgba(35, 25, 110, 0.6);
padding: 50px 35px;
}

::placeholder{ color: #e5e5e5;
}
input::-webkit- input-placeholder{ color:rgb(158, 16,40);
font-size:19px;
line-height:4px;
}
button{ width:50%; background-

color:#e20c0c;
color:#080710;
padding:15px 0;
font-size:25px;
font:weight 600;
border-radius:10px;
cursor:pointer

}

div{
```



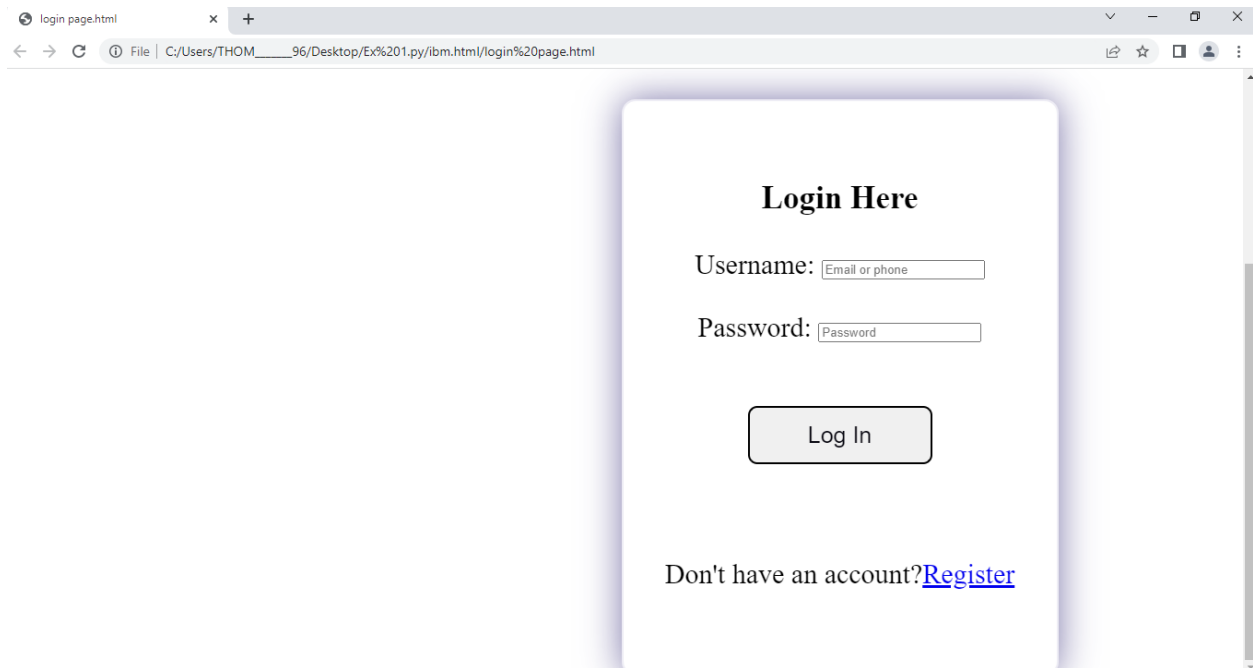
```
background-color:
rgb(173, 35, 120);
width: 445px; height: 600px;    }
</style>
</head>
<center>

<div style="font-size:30px;color: #000;">
<body>
<form>
<h3> Login Here</h3>
<label for="Username">Username:</label>
<input type="text" placeholder="Email or phone" id="Username"><br><br>

<label for="password">Password:</label>
<input type="text" placeholder="Password" id="password"><br><br><br>
<center>
<button>Log In</button>
</center><br><br><br>

<td>Don't have an account?<a href="Register.html">Register
</a></td>
</form>
</body>
</div>
</center>
</html>
```

Output:



A screenshot of a web browser window displaying a login page. The browser's address bar shows the file path: C:/Users/THOM____96/Desktop/Ex%201.py/ibm.html/login%20page.html. The login page has a white background with a light gray border. It features a title "Login Here" in bold black text. Below the title are two input fields: "Username:" with a placeholder "Email or phone" and "Password:" with a placeholder "Password". A "Log In" button is centered below the fields. At the bottom, it says "Don't have an account?" followed by a blue underlined link "Register".

login page.html

File | C:/Users/THOM____96/Desktop/Ex%201.py/ibm.html/login%20page.html

Login Here

Username:

Password:

Log In

Don't have an account? [Register](#)