```html
<html>
<head>
 <title>Registration form</title>
</head>
<body>
<form>
 <table>
<tr>
 <td>
  Name:
  </td>
 <td>
 <input type="text" placeholder="Name" name="">
</td>
</tr>
<tr>
 <td>
  Gender:
 </td>
 <td>
 <input type="radio" name="Gender">Male
 <input type="radio" name="Gender">Female
</td>
</tr>
<tr>
 <td>
  Email:
 </td>
 <td>
 <input type="mail" placeholder="Email" name="">
</td>
</tr>
<tr>
 <td>
  Phone Number:
 </td>
 <td>
 <input type="Phone" placeholder="3486357695" name="">
</td>
</tr>
<tr>
 <td>
  City:
</td>
<td>
 <select>
 <option> </option>
 <option>Sivakasi</option>
 <option>Sankarankovil</option>
 <option>Madurai</option>
```

```
</select>
  </td>
</tr>
<tr>
 <td>
  State:
</td>
<td>
 <select>
  <option> </option>
  <option>Tamilnadu</option>
  <option>Karnadaga</option>
  <option>Andraprathesh</option>
</select>
  </td>

</tr>
<tr>
 <td>
  Country:
</td>
<td>
 <select>
  <option> </option>
  <option>India</option>
  <option>Pakisthan</option>
  <option>Dubai</option>
</select>
  </td>
</tr>
</table>
</form>
</body>
</html>
```