SPRINT 1
REGISTER PHASE HTML CSS

Date	08 November 2022
Team ID	PNT2022TMID17187
Project Name	Project - IoT based safety gadget for Child Safety Monitoring and Notification
TEAM LEADER	BHARANI J
TEAM MEMBERS	AJITH V ARULSELVAN A BHARATH M

PROGRAM:

```
<!DOCTYPE html>
<html lang="en">
<head>
    <meta charset="UTF-8">
    <meta http-equiv="X-UA-Compatible" content="IE=edge">
    <meta name="viewport" content="width=device-width, initial-scale=1.0">
    <title>Registration_page</title>
    <style>          body{
margin: 0%;


        }
.box{
          font-family: Cambria, Cochin, Georgia, Times, 'Times New Roman',
serif;
          padding: 34px;
text-align: center;           }
.texts{          padding: 12px;
border-radius: 23px;
position: relative;
left: 80px;
        }           .text{
padding: 12px;                border-
radius: 23px;                position:
relative;           left: 55px;
```

```css
        }               .text1{
padding: 12px;              border-
radius: 23px;              position:
relative;          left: -9px;
        }               .text2{
padding: 12px;              border-
radius: 23px;              position:
relative;          left: 10px;
        }           #form{
background-color: antiquewhite;
height: 450px;            width: 450px;
margin: 34px 500px;            padding:
34px;            border-radius: 45px;
        }           .button{
position: relative;           right:
-180px;

                        width:
100px;          height: 35px;
background-color: azure;
align-items: center;
font-size: 22px;          }
    </style>
</head>
<body>
    <form id="form">
        <div class="input-wrapper">
            <h1 style="text-align:center">Registration Page</h1>
        <label for="email" class="box">E-mail</label>
        <input type="text" class="texts" placeholder="Type your E-mail"
required><br><br>
        <label for="name" class="box">Username</label>
        <input type="text" class="text" placeholder="Type your username"
required><br><br>
        <label for="password" class="box">Password</label>
        <input type="password" class="text" placeholder="Type your password"
required><br><br>
        <label for="confirm-password" class="box">Confirm-password</label>
<input type="password" class="text1" placeholder="Confirm your password"
required><br><br>
        <label for="phn-no" class="box">Mobile number</label>
<input type="number" class="text2" placeholder="type your
phonenumber" required><br><br><br>
        <input type="button" class="button" value="submit">


    </div>
    </form>


</body>
</html>
```