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{% extends 'base.html' %}


{% block head %}
<title>Sign in page(AGENT)</title>
{% endblock %}


{% block body %}


<body style="background-color:black;" data-target="#pb-navbar" data-offset="200" data-spy="scroll">



    <div class="container" style="padding-top:150px;">


        <div class="row mb-5" >
            <h1 class="page-header text-primary mx-auto"> <span style="color:white;">REGISTER PAGE FOR AGENT</span></h1>
        </div>


        <div class="col-sm height: 100px; justify-content-center ">
            {% with messages = get_flashed_messages(with_categories=true) %}
            {% if messages %}
            {% for category,message in messages %}
            <div class="alert alert-{{category}} " style="color: red;">{{message}}</div>
            {% endfor %}
            {% endif %}


            {% endwith %}
        </div>


        <div class="row justify-content-center" style="height: 1000px;">
            <form action="{{ url_for('agentform') }}" method="POST">
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<div class="form-group">

    <label for="exampleInputname"><span style="color:white;">Name</span></label>

    <input type="text" style="color: white; width: 400px;" class="form-control" id="name" name="name"

        placeholder="Enter Name" required>

</div>


<div class="form-group">

    <label for="exampleInputEmail"><span style="color:white;">Email address</span></label>

    <input type="email" style="color: white;  width: 400px;" class="form-control" id="email"

        name="email" placeholder="Enter email" required>

    <small id="emailHelp"><span style="color:white;">We'll never share your email with anyone else.</span></small>

</div>


<div class="form-group">

    <label for="exampleInputPassword"><span style="color:white;">Password</span></label>

    <input type="password" style="color: white;  width: 400px;" class="form-control" id="password"

        name="password" placeholder="Password" required>

</div>


<div class="form-group">

    <label for="exampleInputphonenumber"><span style="color:white;">Phone Number</span></label>

    <input type="tel" style="color: white;  width: 400px;" class="form-control" id="phonenumber"

        name="phonenumber" placeholder="Enter phone Number" pattern="[0-9]{10}" required>

</div>
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<div class="form-group">

    <label for="exampleFormControlSelect1"><span style="color:white;">Select
Service</span></label>

        <select class="form-control" placeholder="Choose Service want to prefer"

          id="service" name="service">

          <option>Hardware</option>

          <option>Software</option>

          <option>Online services</option>

        </select>

    </div>


    <div class="form-group">

    <label for="exampleInputname"><span style="color:white;">Enter Your
Address</span></label>

        <input type="text" style="color: white; width: 400px;" class="form-control" id="address"
name="address"

        placeholder="Enter Name" required>

    </div>


    <div class="form-group">

    <label for="exampleFormControlSelect1"><span style="color:white;">Enter
City</span></label>

        <select class="form-control" placeholder="Choose Service want to prefer"

          id="city" name="city">

          <option>Chennai</option>

          <option>Bangalore</option>

          <option>Mumbai</option>

          <option>Cochi</option>

        </select>

    </div>


    <div class="form-group">
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        <label for="exampleFormControlSelect1"><span style="color:white;">Enter
State</span></label>

        <select class="form-control" placeholder="Choose Service want to prefer"

          id="state" name="state">

          <option>Tamil Nadu</option>

          <option>Karnataka</option>

          <option>Kerala</option>

          <option>Andhra Pradesh</option>

        </select>

      </div>


      <div class="form-group">

        <label for="exampleFormControlSelect1"><span style="color:white;">Enter
Country</span></label>

        <select class="form-control" placeholder="Choose Service want to prefer"

          id="country" name="country">

          <option>Uk</option>

          <option>India</option>

        </select>

      </div>


      <div class="form-group">

        <label for="exampleInputname"><span style="color:white;">Resume Link</span>/label>

        <input type="text" style="color: white; width: 400px;" class="form-control" id="link"
name="link"

          placeholder="Enter Name" required>

        <small id="emailHelp"><span style="color:white;">Please share your Resume with drive
option as anyone</span>/small>

      </div>


      <button type="submit" class="btn btn-primary mx-auto"><span
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                      style="color:black; font-weight: bolder;">Submit</span></button>


            </form>
        </div>



        <div class="row d-flex">


            <a href="{{ url_for('home') }}" class="btn btn-primary mx-auto" role="button"><span
                    style="color:white; font-weight: bolder;">Back</span>
            </a>


        </div>


    </div>


    {% endblock %}
</body>

</html>
```