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<!DOCTYPE html>
<html>
  <head>
    <title>MY INFO</title>
    <style>
      div {
        margin-bottom: 10px;
      }
      label {
        display: inline-block;
        width: 150px;
      }
    </style>
  </head>
  <body>
<h2> FORM </h2>
    <form action="/form/submit" method="post">
      <div>
        <label for="name">Name</label>
        <input type="text" id="name" placeholder="Enter your name" />
      </div>
      <div>
        <label for="age">Your Age</label>
        <input type="text" id="age" name="age" placeholder="Enter your age" />
      </div>
      <div>
        <label for="country">Enter Your Country</label>
        <input type="text" id="country" name="country" placeholder="Country" />
      </div>
    </div>
    <p>Gender</p>
    <input type="radio" id="male" name="male" value="MALE">
    <label for="html">MALE</label><br>
    <input type="radio" id="female" name="male" value="FEMALE">
    <label for="css">FEMALE</label><br>
  </div>
  <input type="submit" value="Submit" />
</body>
</html>
```

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