REGISTRATION PAGE HTML

<!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"></script>

<script src="https://www.google.com/recaptcha/api.js" async defer></script>

<style type="text/css">

body{

margin: 10px 10px 10px 100px;

background-color:lavender;

}

.error {

color: red;

}

.fm1 {

text-align: center;

}

```
.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"><h1><b>REGISTRATION</b></h1></label>

</div>

<div class="outerbox">

<div class="fixedbox">
```

```html
<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">

<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">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>
```

```html
<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>

<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> -->

<tr>

<td>

<label class="lb1">State:-</label>

<input type="text" name="state">

</td>
```

```html
</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>

</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">

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

</div>

</form>

</div>

</div>

</div>

<!-- Responsive table -->

<div class="rregisterdonor">

<form action="process.php" method="POST" id="myform">

 </html>