INDEX.html

```
<!DOCTYPE html>
<html lang="en">
<head>
<meta charset="UTF-8">
<title>Login Page with Background Image Example</title>
<link rel="stylesheet" href="style.css">
</head>
<body>
<!-- partial:index.partial.html -->
<div id="bg"></div>
<form action="formp.html" method="post">
<div class="form-field">
<input type="email" placeholder="Email / Username" required/>
</div>
<div class="form-field">
<input type="password" placeholder="Password" required/> </div>
<div class="form-field">
<button class="btn" type="submit">Log in</button>
</div>
</form>
<!-- partial -->
</body>
</html>
```

FORM.html

```
<html>
<head>
  <style>
    body {
      background-image:
url('https://www.expatrio.com/sites/default/files/styles/image_slider/public/2
022-05/hermes-rivera-Ww8eQWjMJWk-unsplash_3.jpg?itok=aqyA4cvZ');
      position: fixed;
      left: 0;
      top: 0;
      width: 100%;
      height: 100%;
      background-size: cover;
    }
    form {
      margin-top: 3%;
      font-size: 25px;
    }
    table {
      font-size: 25px;
    }
    input,
    select,
    option {
      font-size: 20px;
```

```
background-color: transparent;
      color: black;
      border: 3px groove gray;
      cursor: pointer;
    }
    button {
      border: 5px double black;
      border-radius: 5px;
      padding-left: 6px;
      columns: rgb(159, 1, 1);
      background: transparent;
      font-size: 20px;
      cursor: pointer;
    }
    button:hover {
      border: 5px groove red;
      border-radius: 5px;
      padding-left: 6px;
      columns: rgb(3, 3, 3);
      background: gray;
      font-size: 20px;
      cursor: pointer;
    }
  </style>
</head>
<body>
```

```
<div id="bg"></div>
 <form action="calories.html" method="post">
   <center>
    Name
       <input type="text" name="name" placeholder="Enter your
name" required>
      Sex
       <select required>
         <option value=""></option>
         <option value="male">Male</option>
         <option value="female">Female</option>
       </select>
      Age
       <input
                 type="tel"
                             name="age" pattern="[0-9]{2}"
placeholder="Enter your age" required> 
      Phone no.
       <input type="tel" name="number"
                                        pattern="[0-9]{10}"
placeholder="Enter your phone no." required>
```

```
Height
        <input type="number" name="height" placeholder="Enter your
height" required>
       Weight
        <input type="number" name="weight" placeholder="enter your
weight" required>
       Medical Condition
        <select required>
            <option value=""></option>
            <option value="diabetes">Diabetes
            <option value="pre-diabetes">Pre-Diabetes
            <option value="hypertension">Hypertension</option>
            <option value="pcos">PCOS</option>
            <option value="thyroid">Thyroid</option>
            <option value="physical injury">Physical Injury
            <option value="sleep issue">Sleep issue
            <option value="depression">Depression</option>
            <option value="anger issue">Anger Issue
            <option value="loneliness">Loneliness
          </select>
```

```
Do you want any medical conditions 
<input type="radio" name="nutri" id="yes" value="yes">Yes
<input type="radio" name="nutri" id="no" value="No">No<br><br>
<button>next</button>
</center>
</form>
</body>
</html>
```

CALORIES.html

```
<html>
<head>
link rel="stylesheet" href="calories.css">
</head>
<body>
<center>
<h1>food Calories</h1><br>
<label>
<h3>Servings:</h3>
<input type="number" id="numberOfStocks" value="1" min="0" />
</label><br/>
</label><br/>
<div>
</div>
```

```
<div class="side">
  <h2>Breakfast<span class="servingUnit"></span>:</h2>
  <select class="selectStock">
  <option value="-1">Pick a food!</option>
</select>
  <br>
  <br>
  <div class="result"></div>
</div>
<div class="side">
  <h2>Lunch<span class="servingUnit"></span>:</h2>
  <select class="selectStock">
  <option value="-1">Pick a food!</option>
</select>
  <br>
  <br>
  <div class="result"></div>
</div>
<div class="side">
  <h2>Dinner<span class="servingUnit"></span>:</h2>
  <select class="selectStock">
  <option value="-1">Pick a food!</option>
</select>
  <br>
  <br>
  <div class="result"></div>
```

```
</div>
    </div>
    <div class="comparison">
      <h2>Comparison:</h2>
      <br>
      <div class="result"></div>
    </div>
  </center>
  <form action="bmi.html" method="post">
    <button>Next</button>
  </form>
  <script
src="https://ajax.googleapis.com/ajax/libs/jquery/2.1.1/jquery.min.js"></scrip
t>
  <script type="text/javascript" src="js/calory.js"></script>
</body>
</html>
BMI.html
<!doctype html>
<html lang="en">
<head>
  <!-- Required meta tags -->
  <meta charset="utf-8">
         name="viewport" content="width=device-width, initial-scale=1,
  <meta
shrink-to-fit=no">
  <!-- Bootstrap CSS -->
```

```
k
                                                            rel="stylesheet"
href="https://stackpath.bootstrapcdn.com/bootstrap/4.5.2/css/bootstrap.min.
css"
                                                          integrity="sha384-
JcKb8q3iqJ61gNV9KGb8thSsNjpSL0n8PARn9HuZOnIxN0hoP+VmmDGMN5t9UJ
OZ" crossorigin="anonymous">
  <title>Calorie Calculator</title>
  <style>
    #loading,
    #results {
      display: none;
    }
    #loading {
      width: 100%;
    }
  </style>
</head>
<body>
  <div class="container">
    <div class="row">
      <div class="col-lg-6 mx-auto">
        <div class="card card-body text-center mt-5">
          <h1 class="heading display-5 pb-3">Calorie Calculator</h1>
          <form id="calorie-form">
            <div class="form-group row">
               <label for="age" class="col-sm-2 col-form-label">Age</label>
               <div class="col-sm-10">
```

```
type="number" class="form-control"
                                                                 id="age"
                <input
placeholder="Ages 15-80" required>
              </div>
            </div>
            <fieldset class="form-group">
              <div class="row">
                         class="col-form-label
                                                        col-sm-2
                <legend
                                                                       pt-
0">Gender</legend>
                <div class="col-sm-10" id="form-radio">
                  <div class="custom-control custom-radio custom-control-
inline">
                                       type="radio"
                                                                id="male"
                    <input
name="customRadioInline1"
                                              class="custom-control-input"
checked="checked">
                    <label
                                               class="custom-control-label"
for="male">Male</label>
                  </div>
                  <div class="custom-control custom-radio custom-control-
inline">
                                                              id="female"
                    <input
                                      type="radio"
name="customRadioInline1" class="custom-control-input">
                                               class="custom-control-label"
                    <label
for="female">Female</label>
                  </div>
                </div>
              </div>
            </fieldset>
            <div class="form-group row">
```

```
for="weight"
              <label
                                           class="col-sm-2
                                                                col-form-
label">Weight</label>
              <div class="col-sm-10">
                <input type="number" class="form-control" id="weight"
placeholder="In kilograms" required>
              </div>
            </div>
            <div class="form-group row">
                          for="height" class="col-sm-2
                                                                col-form-
              <label
label">Height</label>
              <div class="col-sm-10">
                <input type="number" class="form-control" id="height"
placeholder="In centimeters" required>
              </div>
            </div>
            <div class="form-group row">
              <legend class="col-form-label col-sm-2 pt-0">Activity</legend>
              <select class="custom-select col-sm-10" id="list" required>
         <option selected value="1">Sedentary (little or no exercise)
         <option value="2">Lightly active (light exercise/sports
                                                                      1-3
days/week)</option>
         <option value="3">Moderately active (moderate exercise/sports 3-5
days/week)</option>
         <option value="4">Very active (hard exercise/sports 6-7 days a
week)</option>
         <option value="5">Extra active (very hard exercise/sports & physical
job or 2x training)</option>
        </select>
            </div>
```

```
<div class="form-group">
              <input type="submit" value="Calculate" class="btn btn-primary
btn-block">
            </div>
          </form>
          <div id="loading">
            <img src="./img/Loading.gif" alt="">
          </div>
          <div id="results" class="pt-4">
            <h5>Total Calories</h5>
            <div class="form-group">
               <div class="input-group">
                        type="number" class="form-control" id="total-
                <input
calories" disabled>
               </div>
            </div>
          </div>
        </div>
      </div>
    </div>
  </div>
                       src="https://code.jquery.com/jquery-3.5.1.slim.min.js"
  <script
integrity="sha384-
DfXdz2htPH0lsSSs5nCTpuj/zy4C+OGpamoFVy38MVBnE+IbbVYUew+OrCXaRkfj"
crossorigin="anonymous"></script>
  <script
src="https://cdn.jsdelivr.net/npm/popper.js@1.16.1/dist/umd/popper.min.js"
```