**Experiment4**

<!DOCTYPE html>

<html lang="en">

<head>

<meta charset="UTF-8">

<meta name="viewport" content="width=device-width, initial-scale=1.0">

<title>Registration Form</title>

<style>

body {

font-family: Arial, sans-serif;

background-color: #f0f0f0;

margin: 0;

padding: 20px;

}

h1 {

color: #333;

text-align: center;

}

table {

width: 100%;

max-width: 600px;

margin: 0 auto;

background-color: #fff;

padding: 20px;

border-radius: 8px;

box-shadow: 0 0 10px rgba(0,0,0,0.1);

}

td {

padding: 10px;

}

label {

color: #555;

font-weight: bold;

}

input[type="text"], input[type="email"], input[type="password"], select, textarea {

width: 100%;

padding: 8px;

border: 1px solid #ddd;

border-radius: 4px;

box-sizing: border-box;

font-size: 16px;

}

input[type="radio"], input[type="checkbox"] {

margin-right: 5px;

}

input[type="submit"] {

background-color: #4CAF50;

color: white;

padding: 10px 20px;

border: none;

border-radius: 4px;

cursor: pointer;

font-size: 18px;

}

input[type="submit"]:hover {

background-color: #45a049;

}

.error {

color: #ff0000;

font-size: 14px;

}

</style>

</head>

<body>

<h1>Registration Form</h1>

<form action="#" method="post">

<table>

<tr>

<td><label for="fullname">Full Name:</label></td>

<td><input type="text" id="fullname" name="fullname" required></td>

</tr>

<tr>

<td><label for="email">Email:</label></td>

<td><input type="email" id="email" name="email" required></td>

</tr>

<tr>

<td><label for="password">Password:</label></td>

<td><input type="password" id="password" name="password" required></td>

</tr>

<tr>

<td><label for="confirm\_password">Confirm Password:</label></td>

<td><input type="password" id="confirm\_password" name="confirm\_password" required></td>

</tr>

<tr>

<td><label>Gender:</label></td>

<td>

<input type="radio" id="male" name="gender" value="male" required>

<label for="male">Male</label>

<input type="radio" id="female" name="gender" value="female" required>

<label for="female">Female</label>

<input type="radio" id="other" name="gender" value="other" required>

<label for="other">Other</label>

</td>

</tr>

<tr>

<td><label for="birthdate">Date of Birth:</label></td>

<td><input type="date" id="birthdate" name="birthdate" required></td>

</tr>

<tr>

<td><label for="country">Country:</label></td>

<td>

<select id="country" name="country" required>

<option value="">Select a country</option>

<option value="usa">India</option>

<option value="uk">United Kingdom</option>

<option value="canada">Canada</option>

<option value="australia">Australia</option>

<option value="other">Other</option>

</select>

</td>

</tr>

<tr>

<td><label for="interests">Interests:</label></td>

<td>

<input type="checkbox" id="sports" name="interests[]" value="sports">

<label for="sports">Sports</label>

<input type="checkbox" id="music" name="interests[]" value="music">

<label for="music">Music</label>

<input type="checkbox" id="reading" name="interests[]" value="reading">

<label for="reading">Reading</label>

<input type="checkbox" id="travel" name="interests[]" value="travel">

<label for="travel">Travel</label>

</td>

</tr>

<tr>

<td><label for="bio">Bio:</label></td>

<td><textarea id="bio" name="bio" rows="4"></textarea></td>

</tr>

<tr

<td colspan="2" style="text-align: center;">

<input type="submit" value="Register">

</td>

</tr>

</table>

</form>

</body>

</html>