Ans1…

```
!DOCTYPE html>
<html>
    <head>
        <title>Demo 9</title>
        <style>
        h1{
            background-color: blue;
          }

          div{
            background-color: lightblue;
          }
           p{
            background-color: lightcyan;
           }
          </style>
          </head>
          <body>
        <div>
           <h1>CSS background -color example</h1>


           This is a text inside div element

        <p>This paragrapgh has its own background color</p>
        We are still in the div element
     </div>
          </body>
      </head>
</html>
```

Ans2

```
<!DOCTYPE html>
<html>
    <head>
        <title>Demo 10</title>
        <style>

          body{
              background-color: skyblue;
          }
          h2{
              text-decoration: line-through;
          }
          h3{
              text-decoration: underline;
          }
```

```html
        </style>
    </head>
    <body>
    <h1>This is a heading 1</h1>
    <h2>This is a heading 2</h2>
    <h3>This is a heading 3</h3>
    <h4>This is a heading 4</h4>
    </body>
</html>
```

Ans3..

```html
<!DOCTYPE html>
<html>
    <head>
        <title>demo 11</title>
        <style>
        body{
            background-color: skyblue;
            }
    </style>
    </head>
    <body>
        <h4>THIS IS SOME TEXT</h4>
        <p>this is some text</p>
        <p>this is some text</p>
    </body>
</html>
```

Ans4..

```html
<!DOCTYPE html>
<html>
    <head>
        <title>Demo14</title>
        <style>
            a:link{
                color: red;
            }
            a:visited{
                color: green;
            }
            a:active{
                color: blue;
            }
        </style>
    </head>
    <body>
```

```html
            <p><b><a href="default.html" target="blank">This is a link</a></p></b>
    </body>
</html>
```

Ans5..

```html
<!DOCTYPE html>
<html>
    <head>
        <title>Demo 15</title>
        <style>


                table,td,th{
                    border: 1px solid;
                    border-collapse: collapse;


                }

        </style>
        <body>
        <table>
            <tr>
                <th>FirstName</th>
                <th>LastName</th>
            </tr>
            <tr>
                <td>Peter</td>
                <td>Griffin</td>
            </tr>
            <tr>
                <td>Lois</td>
                <td>Griffin</td>
            </tr>
        </table>
    </body>
    </head>
</html>
```

Ans6..

```html
<!DOCTYPE html>
<html>
    <head>
        <title>Demo 16</title>
        <style>
                table,tr,th ,td{

                    border: 2px solid;
                    border-color: green;
```

```
                border-style: double;
            }
            th{
                background-color: green;
            }

    </style>



    <body>
        <table>
            <tr>
            <th>FirstName</th>
            <th>LastName</th>
            <th>Savings</th>
            </tr>

            <tr>
                <td>Peter</td>
                <td>Griffin</td>
                <td>$100</td>
            </tr>

            <tr>
                <td>Lois</td>
                <td>Griffin</td>
                <td>$150</td>
            </tr>

            <tr>
                <td>Joe</td>
                <td>Swanson</td>
                <td>$300</td>
            </tr>

            <tr>
                <td>Cleverland</td>
                <td>Brown</td>
                <td>$2250</td>
            </tr>

        </table>
    </body>
    </head>
</html>
```

Ans8..

```
!DOCTYPE html>
```

```html
<html>
    <head>
        <title>Demo 16</title>
        <style>

            p.first{
                background-color: lightblue;
                border-style: solid;
            }
            p.second{
                background-color: lightblue;
                border-style: groove;
            }
            p.third{
                background-color: lightblue;


            }

        </style>
        <body>

                <p class="first">Some text,</p>


                <p class="second">Some text,</p>


                <p class="third">Some text,</p>



        </body>
    </head>
</html>
```

FORM MAKING

```html
<!DOCTYPE html>
<html>
    <head>
        <title>Register Form</title>
        ,<link rel="stylesheet" type="text/css" href="form.css">
        <body>

            <style>

                    .container{
```

```
                    padding: 2px;
                    display: flex;
                    justify-content: center;
                    flex-wrap: wrap;
                    background-color: cadetblue;


                    width: 90%;
                    height: 600px;
                    text-align: center bold black;



        }



    </style>
    <div class="container">
    <form action="results.html" method="get" >
        <h1>RAGISTRATION FORM</h1>
        <table>
            <tr>
                <td>UserName:</td>
                <td><Input type="text"  name="text" placeholder="Username"
id="name" required></td>
            </tr>
            <tr>
                <td>Password :</td>
                <td><input type="password" name="password"
placeholder="password" id="password" required></td>
            </tr>
            <tr>
                <td>Email : </td>
                <td><input type="Email" name="email" placeholder="Email"
id="email" required></td>
            </tr>
            <tr>
                <td>Gender : </td>
                <td>
                    <input type="radio" name="Gender">Male
                    <input type="radio" name="Gender">Female
                    <input type="radio" name="Gender">Other
                </td>
                <tr>
                    <td>Date of Birth : </td>
                    <td><input type="date" name="" id="dob"></td>
                </tr>
                <tr>
```

```html
                <td>Age : </td>
                <td><input type="number" name="" id="age" min="1"
max="55"></td>
            </tr>
        </tr>
        <tr>
        <td>Phone no : </td>
        <td>
        <select >
            <option>+91</option>
            <option>+92</option>
            <option>+93</option>
            <option>+94</option>
            <option>+95</option>
            <option>+96</option>
        </select>
        <input type="Phone" placeholder="9891******" name=""
id="phoneno" required>
        </td>
        </tr>

        <tr>
            <td>Please submit your Bio : </td>
            <td>
            <textarea name="bio" id="bio" cols="30"
rows="10"></textarea>
            </td>
        </tr>
        <tr>
            <td>Please submit your adhar card : </td>
            <td><input type="file" id="file"> </td>
        </tr>
        <tr>
            <td><input type="reset" name="Reset"></td>
            <td><input type="submit" name="Submit"></td>
        </tr>

        </table>
    </form>
    </div>
    </body>
    </head>
</html>
```

RAGISTRATION FORM

UserName: _____ (Username)

Password : _____ (password)

Email : _____ (Email)

Gender : ○ Male ○ Female ○ Other

Date of Birth : mm / dd / yyyy 📅

Age : _____

Phone no : [+91 ▼] 9891******

Please submit your Bio : _____

Please submit your adhar card : [Choose File] No file chosen

[Reset]   [Submit]