

PROGRAMME-5

Aim:

Demonstrate a registration page using HTML

Code:

form.html

```
<html>
<head>
  <title>Registration form</title>
  <link rel="preconnect" href="https://fonts.gstatic.com">
  <link href="https://fonts.googleapis.com/css2?family=Akaya+Telivigala&display=swap"
rel="stylesheet">
  <style>
    * {
      box-sizing: border-box;
    }

    body {
      background-color: #66717F;
      width: 100%;
      height: 100vh;
      padding-top: 4em;
    }

    .regform {
      background: #2E3740;
      color: #858f99;
      margin: auto;
      width: 50%;
      border: 1px solid black;
      box-shadow: rgba(0, 0, 0, 0.25) 0px 14px 28px, rgba(0, 0, 0, 0.22) 0px 10px 10px;
    }

    .content {
      margin: auto;
      width: 60%;
    }

    h1 {
      color: #6D7781;
      font-family: 'Akaya Telivigala', cursive;
      text-align: center;
    }

    legend{
```

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        color: #6D7781;
        font-family: 'Akaya Telivigala', cursive;
    }
    label{
        font-family: 'Akaya Telivigala', cursive;
    }

    .first {
        text-align: right;
        width: 40%;
    }

    .button {
        text-align: center;
    }
    input {
        padding: 5px 10px 5px 10px;
        height: 2em;
        border-radius: 5px;
        border:1px solid #858f99;
        background: #2E3740;
        color: #858f99;
    }
    input[type="radio"],input[type="checkbox"]{
        color: #2E3740;
    }
    fieldset{
        border:1px solid #858f99;
    }
    select{
        padding: 5px;
        height: 2em;
        border-radius: 5px;
        border:1px solid #858f99;
        background: #2E3740;
        color: #858f99;
    }
    textarea{
        background: #2E3740;
        padding: 5px;
        border-radius: 5px;
        border:1px solid #858f99;
        color: #858f99;
    }

    input[type="submit"] {
        margin-top: 3em;
        width: 8em;
        height:2.5em;
        text-align: right;
        text-align: center;
    }

```

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        background-color: #1FCE6D;
        cursor:pointer;
        color:#2E3740;
    }
    input[type="text"],input[type="tel"],textarea,select{
        width:90%;
    }
    .row{
        margin-top: 0.5em;
    }
    .radiobtn{
        position: relative;
        top:8px;
    }
    .checkboxbx{
        position: relative;
        top:8px;
    }
    form{
        margin-top: 1em;
    }
    /* span #phone{
        border:none;
    }
    span{
        border:1px solid black;
    } */
</style>
</head>

```

```

<body>
<div class="regform">
<h1>REGISTRATION FORM</h1>
<hr width="50%">
<div class="content">
<form>
<div class="row">
<label for="name">Name:</label><br>
</div>
<div class="row">
<input type="text" name="name"><br>
</div>

<div class="row">
<label for="age">Age:</label><br>
</div>
<div class="row">
<input type="text" name="age"><br>
</div>

<div class="row ">
<label for="gender">Gender:</label>

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        <input class="radiobtn" name="gender" type="radio" value="male" >
        <label for="male">Male</label>
        <input class="radiobtn" name="gender" type="radio" value="female">
        <label for="female">Female</label>
        <input class="radiobtn" name="gender" type="radio" value="other">
        <label for="other">other</label><br>
    </div>

    <div class="row">
        <label for="address">Address:</label><br>
    </div>
    <div class="row">
        <textarea name="address" id="" cols="21" rows="5"></textarea><br>
    </div>

    <div class="row"></div>
    <label for="ph">Phone:</label><br>
    <div class="row"></div>
    <span>+91<input type="tel" name="ph" id="phone" style="width:85%;"></span><br>

    <fieldset><legend>Please select atleast one</legend>
    <div class="row">
        <label for="qualification">Latest qualification:</label><br>
    </div>
    <div class="row">
        <select name="qualification" id="qualification">
            <option>choose</option>
            <option value="SSLC">SSLC</option>
            <option value="PLUS TWO">PLUS TWO</option>
            <option value="DEGREE/DEPLOMA">DEGREE/DEPLOMA</option>
            <option value="PG">PG</option>
        </select><br>
    </div>

    <div class="row">
        <label for="nationality">Nationality:</label><br>
    </div>
    <div class="row">
        <select name="nationality" id="nationality" >
            <option>choose</option>
            <option value="INDIA">INDIA</option>
            <option value="AUSTRALIA ">AUSTRALIA</option>
            <option value="AMERICA">AMERICA</option>
            <option value="UK">UK</option>
            <option value="EUROPE">EUROPE</option>
        </select><br>
    </div>
</fieldset>
    <div class="row">
        <label for="courses">Course completed:</label>
    </div>
    <div class="row">

```

```

<input class="checkbox" type="checkbox" name="ssl" id="ssl">
<label for="ssl">SSL</label>
<input class="checkbox" type="checkbox" name="plus two" id="plustwo">
<label for="plustwo">PLUS TWO</label>
<input class="checkbox" type="checkbox" name="degree" id="degree">
<label for="degree">DEGREE</label>
<input class="checkbox" type="checkbox" name="pg" id="pg">
<label for="pg">PG</label>
</div>

<div class="row" style="display: flex;flex-direction: row-reverse;">
  <input type="submit" value="submit" style="justify-content: end; margin:0 0 0 10px;">
  <input type="submit" value="clear" style="margin:0 0 0 10px;">
</div>
</form>
</div>
</div>
</body>
</html>

```

Output:

The screenshot shows a web browser with a registration form. The form is titled "REGISTRATION FORM" and is set against a dark background. The form fields are as follows:

- Name:** Samuel J
- Age:** 21
- Gender:** Male (selected), Female, other
- Address:** A K Family Quarters, Vatakara, Vatakara PO, 673101
- Phone:** +91 7034491692
- Latest qualification:** DEGREE/DEPLOMA (selected from a dropdown menu)
- Nationality:** INDIA (selected from a dropdown menu)
- Course completed:** SSL, PLUS TWO, DEGREE, PG (all are checked)

At the bottom of the form, there are two buttons: "clear" and "submit".