**Cognitoforms**

**Project Documentation**

**User registration form for health insurance:**

- Field “First Name” is mandatory, and accepts only letters and “space” characters.

- Field “Last Name” is mandatory, and accepts only letters and “space” characters.

- Field “SSN” must have 9 numbers only.

- Field “Address Line 1” is mandatory and accepts all characters.

- Field “Address Line 2” is not mandatory and accepts all characters.

- Fields “State/Province/Region” “Postal/Zip Code” and “Country” are mandatory.

- Field “State/Province/Region” accepts only letters.

- Field “Postal/ZIP code” accepts only 5 or 9 numbers (Between 5th and 6th number must be a character “-”) (ONLY FOR USA), for other countries with Postal/Zip Code accept all characters without any limitations. Countries without Postal/Zip Code can enter “00000” in the field “Postal/Zip Code”.

- Field “Country” is a drop-down menu, you can select only one option.

- Field “Date of Birth” is a drop-down list calendar (date picker) form, and you can select only one date between 1.1.1900 and the current date.

- Field “ Date of Death” is a drop-down list calendar (date picker) form, and you can select only one date between 1.1.1900 and the current date.

- Field “Email” is mandatory and accepts only valid email forms.

- Field “Work Phone” accepts only numbers ranging from 10 to 18.

- Field “Home Phone” accepts only numbers.

- Field “Preferred contact” is a drop-down menu and you can leave it blank or select only one option.

- In the “Marital Status” section you can tick only one box.

- In the “Health Behaviors” section you can choose more than one option.

- Field “Username” is mandatory and accepts all characters.

- Section “Patient Photo” accepts only valid picture extensions and the maximum size is 100MB.