html>

<body background="C:\Users\arika\OneDrive\Desktop\image book.jpeg">

<head>

<title>Registration Page</title>

</head>

<body>

<style>

</style>

</body>

<center><h3><b>REGISTRATION FORM</b></h2></center><br>

<center><h4>BOOK DONER FORM</h4></center><br>

<hr>

<lable>Enter Your Full Name</lable><br>

<br>

<lable>First Name : </lable>

<Input type="text"name="n1"><br>

<br>

<lable>Middle Name : </lable>

<Input type="text"name="n2"><br>

<br>

<lable>Last Name : </lable>

<Input type="text"name="n3"><br>

<br>

<hr>

<lable>Enter The Email ID</lable><br>

<br>

<lable>Email ID : </lable>

<Input type="email"="n4"><br>

<br>

<hr>

<lable>Enter The Mobile No</lable><br>

<br>

<lable>Mobile No : </lable>

<input type="mobile no"="n5"><br>

<br>

<hr>

<lable>Enter The Address</lable><br>

<br>

<lable>Address : </lable>

<Input type="address"="n6"><br>

<br>

<hr>

<lable>Enter The Password</lable><br>

<br>

<lable>Password : </lable>

<Input type="password"="n1"><br>

<br>

<hr>

<lable>Enter The Gender</lable><br>

<br>

<Input type="radio"="r1" value="Male"/>Male<br>

<Input type="radio"="r2" value="Female"/>Female<br>

<Input type="radio"="r3" value="Other"/>Other<br>

<br>

<hr>

<lable>Book Type</lable><br>

<br>

<Input type="checkbox"="r1" value="Engineering Maths"/>Engineering Maths<br>

<Input type="checkbox"="r2" value="Modern Physics"/>Modern Physics<br>

<Input type="checkbox"="r3" value="ANCRT"/>ANCRT<br>

<br>

<hr><Input type="Submit"name="s1">

</html>