

## Sudhiksha 4mw23cs166

### Registration Form

#### Personal Information

First Name:	<input type="text" value="Sudhiksha"/>
Last Name:	<input type="text" value="Poojary"/>
Email:	<input type="text" value="sudhiksha.23cs166@sode-edu.in"/>
Password:	<input type="password" value="*****"/>
Gender:	<input type="radio"/> Male <input checked="" type="radio"/> Female
Country:	<input type="text" value="India"/>
Hobbies:	<input type="checkbox"/> Reading <input checked="" type="checkbox"/> Travelling <input type="checkbox"/> Sports
Address:	<input type="text" value="Katapady"/>

[Register](#)[Reset](#)

Activate  
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