

OUTPUT



Welcome to the **ANGULAR!**

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Type Your Name

Hello lthal Kiyara

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REGISTRATION FORM

First Name

Last Name

Email

Password

REGISTER

REGISTRATION FORM

First Name

First Name is required

Last Name

Last Name is required

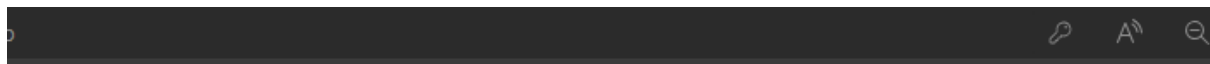
Email

Email is required

Password

Password is required

REGISTER



[Click to Register](#)

[Sign up with angCare](#)

REGISTRATION FORM

First Name

Last Name

Email

Password

REGISTER



localhost:4200 says

Your request has been submitted for approval

OK

REGISTRATION FORM

First Name

Last Name

Email

Password

REGISTER