```
<!DOCTYPE html>
   <html lang="en">
       <meta charset="UTF-8">
       <meta name="viewport" content="width=device-width, initial-scale=1.0">
       <title>form</title>
       <form action="./response.html" target="_blank" name="Hotel Room Booking Form" method="">
               <legend align="center"><b>Hotel Room Booking Form</b></legend>
               <label for="name">Full Name:</label>
               <input type="text" id="name" name="name" placeholder="Enter your name" required>
               <label for="email">Email:</label>
               <input type="email" id="email" name="email" placeholder="Enter your email" required>
               <label for="tel">Phone:</label>
               <input type="tel" id="tel" name="tel" placeholder="Enter your phone number" required>
               <lable for="cid">Check-in Date:</lable>
               <input type="date" id="cid" name="cid" required>
               <lable for="cod">Check-out Date:</lable>
               <input type="date" id="cod" name="cod" required>
               <lable for="room">Room Type:</lable>
               <select id="room" name="room"</pre>
                   <option value="none" selected disabled>Select an option
                   <option value="s">Single Room</option>
                   <option value="d">Double Room</option>
                   <option value="f">Family Room</option>
               <label for="guests">Number of Guests:</label>
               <input type="number" id="guests" name="guests" min="1" max="10" required>
               <label for="requests">Special Requests:</label><br>
               <textarea id="requests" name="requests" rows="4" cols="50" placeholder="Enter any special requests here..."></textarea>
               <input type="submit" value="Book Now">
               <input type="reset" value="Reset">
```

Hotel Room Booking Form	
Full Name: Enter your name	
Email: Enter your email	
Phone: Enter your phone number	
Check-in Date: dd-mm-yyyy	
Check-out Date: dd-mm-yyyy	
Room Type: Select an option ✓	
Number of Guests:	
Special Requests:	
Enter any special requests here	
Book Now Reset	

```
1 <!DOCTYPE html>
2 <html lang="en">
       <meta charset="UTF-8">
       <meta name="viewport" content="width=device-width, initial-scale=1.0">
       <h1 align="center">Student Registration Form</h1>
       <form action="./response 5.html" target="_blank" name="Student Registration Form" method="post">
               <label for="name">Full Name:</label>
               <input type="text" id="name" name="name" placeholder="Enter your name" required>
               <label for="email">Email:</label>
               <input type="email" id="email" name="email" placeholder="Enter your email" required>
               <lable for="password">Password:</lable>
               <input type="password" id="password" name="password" placeholder="Enter your password" required>
               <label for="gender">Gender:</label>
               <input type="radio" id="male" name="gender" value="male" required>
                <lable for="male">Male</lable>
               <input type="radio" id="female" name="gender" value="female" required>
               <lable for="female">Female</lable>
               <input type="radio" id="other" name="gender" value="walmart bag" required>
               <lable for="other">Other</lable>
               <label for="courses">Select Course:</label>
               <select id="courses" name="courses" required>
                   <option value="" disabled selected>Select your course</option>
                   <option value="btech">B.Tech</option>
                   <option value="bca">BCA</option>
                   <option value="bsc">B.Sc</option>
                   <option value="mba">MBA</option>
               <label for="tel">Contact No:</label>
               <input type="tel" id="tel" name="tel" placeholder="Enter your phone number" required>
               <lable for="address">Address:</lable><br>
               <textarea id="address" name="address" rows="4" cols="30" placeholder="Enter your address" required></textarea>
               <input type="submit" value="Register">
               <input type="reset" value="Clear">
       © 2025 Student Registration Portal
```

## Full Name: Enter your name Email: Enter your password Password: Enter your password Gender: O Male O Female O Other Select Course: Select your course V Contact No: Enter your phone number Address: Enter your address Register Clear

**Student Registration Form** 

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