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<!DOCTYPE html>
<html lang="en">
    <head>
        <meta charset="UTF-8">
        <meta name="viewport" content="width=device-width,initial-scale=1.0">
        <title>Registration Form</title>
    </head><style>
        .form-box{
            width:100%;
            border:2px solid black;
            padding:10px;
            margin:0; }
    </style>
    <body>
        <h1 align="center"><b>Student Registration Form</b></h1>
        <div class="form-box">
            <form action="submit_registration.html" method="post">
                <label for="name">Full Name:</label>
                <input type="text" id="name" name="name" placeholder="Enter your name"><br><br>
                <label for="Email">Email:</label>
                <input type="email" id="Email" name="Email" placeholder="Enter your email"><br><br>
                <label for="Password">Password:</label>
                <input type="password" id="Password" name="Password" placeholder="Enter your password"><br><br>
                <label for="gender">Gender</label>
                <select>Gender</select>
                <input type="radio" id="male" name="gender" value="Male" required>
                <label for="male">male</label>
                <input type="radio" id="female" name="gender" value="Female" required>
                <label for="female">female</label><br><br>
                <label for="course">Select Course:</label>
                <select id="course" name="course" required>
                    <option value="">--Select Course--</option>
                    <option value="bca">BCA</option>
                    <option value="bba">BBA</option>
                    <option value="btech">B.Tech</option>
                    <option value="mba">MBA</option></select><br><br>
                <label for="phone">Contact No.:</label>
                <input type="phone" id="phone" name="phone" placeholder="Enter phone number"><br><br>
                <label for="address">Address:</label><br>
                <textarea id="address" name="address" rows="3" cols="40" placeholder="Enter your address" required></textarea><br><br>
                <input type="submit" value="Register">
                <input type="reset" value="Clear Form">
            </form></div>
            <h3 align="center"> &#169; 2025 Student Registration Portal</h3>
        </body>

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</html>