# HTML Assignment 6

```
<!DOCTYPE HTML>
<html lan="en">
    <head>
        <title>Sixth HTML Assignment</title>
    </head>
    <body>
        <table border="double">
            <tr>
                <th>Decimal</th>
                <th>English</th>
                <th>Spanish</th>
                <th>Korean</th>
                <th>Binary</th>
            </tr>
            <tr>
                <td>1</td>
                <td>one</td>
                <td>uno</td>
                <td>hanna</td>
                <td>001</td>
            </tr>
            <tr>
                <td>2</td>
                <td>Two</td>
                <td>dos</td>
                <td>dool</td>
                <td>0010</td>
            </tr>
            <tr>
                <td>3</td>
                <td>Three</td>
                <td>Tres</td>
                <td>Set</td>
                <td>0011</td>
            </tr>
            <tr>
                <td>4</td>
                <td>Four</td>
                <td>Quatro</td>
                <td>Net</td>
                <td>0100</td>
            </tr>
            <tr>
                <td>5</td>
                <td>Five</td>
                <td>Cinco</td>
                <td>Daset</td>
                <td>0101</td>
            </tr>
        </table>
    </body>
</html>
```

**OUTPUT:**

| Decimal | English | Spanish | Korean | Binary |
|---------|---------|---------|--------|--------|
| 1 | one | uno | hanna | 001 |
| 2 | Two | dos | dool | 0010 |
| 3 | Three | Tres | Set | 0011 |
| 4 | Four | Quatro | Net | 0100 |
| 5 | Five | Cinco | Daset | 0101 |

# HTML Assignment 7

```html
<!DOCTYPE HTML>
<html lang="en">
    <head>
        <title>Seventh HTML Assignment</title>
    </head>
    <body>
        <table>
            <tr>
                <td></td>
                <td><h1><b>Registration Login</b></h1></td>
            </tr>
            <tr>
                <td>First Name</td>
                <td><input type="text" name="firstname" placeholder="Enter Your First Name"/></td>
            </tr>
            <tr>
                <td>Last Name</td>
                <td><input type="text" name="lastname" placeholder="Enter Your Last Name"/></td>
            </tr>
            <tr>
                <td>User Name</td>
                <td><input type="text" name="username"/>@indian.com</td>
            </tr>
            <tr>
                <td>Password</td>
                <td><input type="password" name="password" placeholder="Atleast 6 characters"></td>
            </tr>
            <tr>
                <td>Confirm Password</td>
                <td><input type="password" name="confirmpassword"/></td>
            </tr>
            <tr>
                <td>Sex</td>
                <td>
                    <input type="radio" name="Sex" value="male"/>Male
                    <input type="radio" name="Sex" value="female"/>Female
                </td>
            </tr>
            <tr>
                <td>Date of Birth</td>
                <td><input type="date" name="date"/></td>
            </tr>
            <tr>
                <td>Mobile No</td>
                <td><input type="number" name="mobileno" placeholder="Enter Your mobile number"/></td>
            </tr>
            <tr>
                <td>City</td>
                <td><input type="text" name="city" placeholder="Enter your city"/></td>
            </tr>
            <tr>
                <td>State</td>
                <td><input type="text" name="state" placeholder="Enter your State"/></td>
            </tr>
            <tr>
                <td><button>Reset</button></td>
                <td><button type="submit">Submit</button></td>
            </tr>
        </table>
    </body>
</html>
```

**OUTPUT:**

# Registration Login

| | |
|---|---|
| First Name | Enter Your First Name |
| Last Name | Enter Your last Name |
| User Name | [_____]@indian.com |
| Password | Atleast 6 characters |
| Confirm Password | [_____] |
| Sex | ○ Male ○ Female |
| Date of Birth | mm/dd/yyyy 📅 |
| Mobile No | Enter Your mobile number |
| City | Enter your city |
| State | Enter your State |
| Reset | Submit |