ASSIGNMENT 1

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Code:

```
<!DOCTYPE html>
<html>
<head>
  <style>
    .form-container {
     width: 300px;
     margin: 0 auto;
    .form-group {
     margin-bottom: 20px;
    .form-label {
      display: block;
      font-weight: bold;
      margin-bottom: 5px;
    .form-input {
      width: 100%;
      padding: 10px;
      border: 1px solid #ccc;
      border-radius: 4px;
    }
```

```
.form-submit {
      background-color: #4CAF50;
      color: white;
      padding: 10px 20px;
      border: none;
      border-radius: 4px;
      cursor: pointer;
    .form-submit:hover {
      background-color: #45a049;
  </style>
</head>
<body>
  <div class="form-container">
    <form>
      <div class="form-group">
        <label for="name" class="form-label">Name:</label>
        <input type="text" id="name" class="form-input"</pre>
placeholder="Enter your name">
        <label for="age" class="form-label">Age:</label>
        <input type="number" id="age" class="form-input"</pre>
placeholder="Enter your age">
        <label for="date" class="form-label">DOB:</label>
        <input type="date" id="date" class="form-input"</pre>
placeholder="D.O.B">
      </div>
      <div class="form-group">
        <label for="email" class="form-label">Email:</label>
        <input type="email" id="email" class="form-input"</pre>
placeholder="Enter your email">
      </div>
      <div class="form-group">
        <label for="message" class="form-label">Message:</label>
        <textarea id="message" class="form-input" placeholder="Enter</pre>
your message"></textarea>
      </div>
      <input type="submit" value="Submit" class="form-submit">
    </form>
  </div>
</body>
</html>
```

Output:

