<!DOCTYPE html>

<html lang="en">

<head>

<meta charset="UTF-8">

<title>Registration Form</title>

<link rel="stylesheet" href="styles.css" />

</head>

<body>

<h1>Registration Form</h1>

<p>Please fill out this form with the required information</p>

<form method="post" action='https://register-demo.freecodecamp.org'>

<fieldset>

<label for="first-name">Enter Your First Name: <input id="first-name" name="first-name" type="text" required /></label>

<label for="last-name">Enter Your Last Name: <input id="last-name" name="last-name" type="text" required /></label>

<label for="email">Enter Your Email: <input id="email" name="email" type="email" required /></label>

<label for="new-password">Create a New Password: <input id="new-password" name="new-password" type="password" pattern="[a-z0-5]{8,}" required /></label>

</fieldset>

<fieldset>

<label for="personal-account"><input id="personal-account" type="radio" name="account-type" class="inline" /> Personal Account</label>

<label for="business-account"><input id="business-account" type="radio" name="account-type" class="inline" /> Business Account</label>

<label for="terms-and-conditions">

<input id="terms-and-conditions" type="checkbox" required name="terms-and-conditions" class="inline" /> I accept the <a href="https://www.freecodecamp.org/news/terms-of-service/">terms and conditions</a>

</label>

</fieldset>

<fieldset>

<label for="profile-picture">Upload a profile picture: <input id="profile-picture" type="file" name="file" /></label>

<label for="age">Input your age (years): <input id="age" type="number" name="age" min="13" max="120" /></label>

<label for="referrer">How did you hear about us?

<select id="referrer" name="referrer">

<option value="">(select one)</option>

<option value="1">freeCodeCamp News</option>

<option value="2">freeCodeCamp YouTube Channel</option>

<option value="3">freeCodeCamp Forum</option>

<option value="4">Other</option>

</select>

</label>

<label for="bio">Provide a bio:

<textarea id="bio" name="bio" rows="3" cols="30" placeholder="I like coding on the beach..."></textarea>

</label>

</fieldset>

<input type="submit" value="Submit" />

</form>

</body>

</html>

body {

width: 100%;

height: 100vh;

margin: 0;

background-color: #1b1b32;

color: #f5f6f7;

font-family: Tahoma;

font-size: 16px;

}

h1, p {

margin: 1em auto;

text-align: center;

}

form {

width: 60vw;

max-width: 500px;

min-width: 300px;

margin: 0 auto;

padding-bottom: 2em;

}

fieldset {

border: none;

padding: 2rem 0;

border-bottom: 3px solid #3b3b4f;

}

fieldset:last-of-type {

border-bottom: none;

}

label {

display: block;

margin: 0.5rem 0;

}

input,

textarea,

select {

margin: 10px 0 0 0;

width: 100%;

min-height: 2em;

}

input, textarea {

background-color: #0a0a23;

border: 1px solid #0a0a23;

color: #ffffff;

}

.inline {

width: unset;

margin: 0 0.5em 0 0;

vertical-align: middle;

}

input[type="submit"] {

display: block;

width: 60%;

margin: 1em auto;

height: 2em;

font-size: 1.1rem;

background-color: #3b3b4f;

border-color: white;

min-width: 300px;

}

input[type="file"] {

padding: 1px 2px;

}

a{

color:#dfdfe2;

}