```
<!DOCTYPE html>
<html>
<head>
    <title>Inputs Demo</title>
</head>
<body>


<p>Do you prefer cats or dogs</p>


<form>
    <label for= "dogs">Dogs: </label>
    <input name= "petChoice" id= "dogs" type= "radio" value= "DOGS" >


    <label for= "cats">Cats</label>
    <input name= "petChoice" id= "cats" type= "radio" value= "CATS">


    <button>Go</button>
</form>


</body>
</html>
```

Do you prefer cats or dogs?

Dogs:⚪   Ca⚪   Go

```html
<!DOCTYPE html>
<html>
<head>
    <title>Inputs Demo</title>
</head>
<body>

<p>Do you prefer cats or dogs</p>

<form>
    <label for= "dogs">Dogs: </label>
    <input name= "petChoice" id= "dogs" type= "radio" value= "DOGS" >

    <label for= "cats">Cats</label>
    <input name= "petChoice" id= "cats" type= "radio" value= "CATS">

    <p>What's your current mood?<p>

    <select name= "mood">
      <option value= "happy"> 😊 <option>
    <option value= "neutral"> 😐 <option>
    <option value= "sad"> 😟 </option>
  </select>

    <button>Go</button>
</form>
```

</body>

</html>

Do you prefer cats or dogs?

Dogs: ⬭   Ca ⬭   Go

Whats your current mood?

| 😊 | ◇ |

```
<!DOCTYPE html>

<html>

<head>

        <title>Register</title>

<head>

<body>

<h1>Register</h1>


<form>

        <label for= "first">First Name</label>

        <input name= "first" id= "first" type= "text" placeholder= "John" required>

        <label for= "last">Last Name:</label>

        <input name= "last" id= "last" type= "text" placeholder= "Smith" required>


<div>

        <label for= "male"> Male </label>

        <input id= "male" name= "gender" type= "radio" value= "male">

        <label for= "female"> Female </label>

        <input id= "female" name= "gender" type= "radio" value= "female">

        <label for= "other"> Other </label>

        <input id= "other" name= "gender" type= "radio" value= "other">

</div>


<div>

<label>

Birthday:

<select name= "month">

        <option>Month</option>
```

```
                <option>Jan</option>

                <option>Feb</option>

                <option>Mar</option>

        </select>

        <select name= "day">

                <option>Day</option>

                <option>10</option>

                <option>11</option>

                <option>12</option>

        </select>

        <select name= "year">

                <option>Year</option>

                <option>1999</option>

                <option>2000</option>

                <option>2001</option>

        </select>

        </label>

        </div>


        <div>

                <label for= "agreed"> I agree to the terms and conditions: </label>

                <input id= "agreed" name= "agreed" type= "checkbox">

        </div>

        <input type= "submit">

        </form>


        </body>

        </html>
```