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<!DOCTYPE html>
<html>
<!--Molly Patterson 2015 -->
<!--mopatterson-->
<!--registrationForm.html-->
    <head>
        <title>Registration</title>
        <meta charset=utf-8>
        <link rel="stylesheet" type="text/css" href="style.css">
    </head>
    <body>
        <h1>Mosgiel Underwater Hockey Club</h1>
        <div class="register">
            <h2>Registration Form</h2>
            Please complete the form below to register your
interest in Underwater Hockey
            <form method="get" enctype="application/x-www-form-</pre>
urlencoded" action="http://web112.otago.ac.nz/112bin/
112formslab.cgi">
                <div>
                    <input type="hidden" name="recipient"</pre>
value="patmo016@student.otago.ac.nz">
                    <input type="hidden" name="subject"</pre>
value="Registration">
                    <input type="hidden" name="followup-page"</pre>
value="http://csnet.otago.ac.nz/mopatterson/project/Submit.html">
                </div>
                <fieldset class="textInputs">
                    <legend>Register Details</legend>
                    ul>
                        <1 i>
                             <label for="firstname">First name:
label>
                            <input type="text" id="firstname"</pre>
name="Firstname" required pattern="[A-Z a-z-']+"
placeholder="Please enter your first name" size="26">
                        <
                             <label for="surname">Surname:</label>
                             <input type="text" id="surname"</pre>
name="Surename" required pattern="[A-Z a-z-']+" placeholder=
"Please enter your surname" size="26">
                        <
                        <label for="number">Age:</label>
                        <input type="number" id="number"</pre>
name="Age" placeholder= "Please enter your Age" size="22" min="1"
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max="99">
                       <
                           <label for="sender">EmailAddress:
label>
                           <input type="email" id="sender"</pre>
name="sender" placeholder="Please enter your email address"
size="26">
                       i>
                           <label for="phone">Phonenumber:
label>
                           <input type="tel" id="phone"</pre>
name="Phone" required pattern= "[0-9 -()]+" placeholder="Please
enter a Phone number" size="26">
                       </fieldset>
               <fieldset class="gender">
                   <legend>What gender do you associate yourself
as?</legend>
                   ul >
                       <
                           <label><input type="radio"</pre>
name="gender" id="emailcontact" value="female" required>Female/
label>
                       <
                           <label><input type="radio"
name="gender" value="phone" id="phonecontact" required>Male/
label>
                       </fieldset>
               <fieldset class="button">
                   <legend>How did you learn about Mosgiel
Underwater Hockey Club?</legend>
                   ul>
                       <
                           <label><input type="checkbox"
name="Source" id="family" value="Family">Family </label>
                       i>
                           <label><input type="checkbox"
name="Source" id="friends" value="Friends">Friends </label>
                       <
                           <label><input type="checkbox"</pre>
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name="Source" id="online" value="Online">Online </label>
                       <
                           <label><input type="checkbox"</pre>
name="Source" id="adverts" value="Aderts">Advertisements</label>
                       <
                           <label><input type="checkbox"</pre>
name="Source" id="other" value="Other">Other </label>
                       </fieldset>
               <div>
                   <fieldset class= "comments">
                       <legend>Additional Comments</legend>
                       <label>
                           <textarea cols="40" rows="4"
id="comments" name="Additional comments" placeholder="Add any
queries you may have here"></textarea>
                       </label>
                   </fieldset>
                   <fieldset>
                       <leqend>Submission</leqend>
                       <label class="buttons">
                           <input type="reset" name="reset">
                       </label>
                       <label class="buttons">
                           <input type="submit" value="submit">
                       </label>
                   </fieldset>
               </div>
           </form>
            Return to <a href="index.html">Home</a>
       This website was created for a
University project. The content is largely fictional and no
services are actually being offered.
       </body>
</html>
```