**ASSIGNMENT 1**

**NAME** – SAIRAM REDDY

**REGISTRATION NUMBER** – 20BRS1252

**HTML AND CSS:**

<!DOCTYPE html>

<html lang="en">

<head>

<meta charset="UTF-8">

<meta http-equiv="X-UA-Compatible" content="IE=edge">

<meta name="viewport" content="width=device-width, initial-scale=1.0">

<title>HTML Form</title>

<style>

label {

font-weight: bold;

font-family: 'Courier New', Courier, monospace;

font-size: large;

}

html{

background-color: beige;

}

.details-form {

background-color: antiquewhite;

}

</style>

</head>

<body>

<h1>Favourite Web Language</h1>

<hr>

<form action="" class="details-form" >

<label for="fname" >Enter your first name:</label>

<br>

<input type="text" name="fname" id = "fname" required>

<br>

<p></p>

<label for="lname">Enter your last name:</label>

<br>

<input type="text" name = "lname" id="lname">

<br>

<p></p>

<label for="choice">Favourite web language:</label>

<br>

<p></p>

<input type="checkbox" name="HTML" id="HTML" value="HTML">

<label for="choice-html">HTML</label>

<input type="checkbox" name="CSS" id="CSS" value="CSS">

<label for="choice-css">CSS</label>

<input type="checkbox" name="Javascript" id="Javascript" value="Javascript">

<label for="choice-js">Javascript</label>

<br>

</form>

<hr>

<h2>Thank you for filling the form!</h2>

</body>

</html>

**SCREENSHOTS:**

