LOG-IN FORM

```html
<html>
    <head>
        <title>Log-In</title>
    </head>
    <style>

    .shh {
        position:relative;
        background: rgba(225, 179, 179, 0.5)
    }
    </style>
    <body class="bg"bgcolor ="ffe6f7">
    <form>
    <br>
    <br>
    <br>
    <br>
    <br>
    <br>
    <br>
    <br>
    <br>
    <br>
    <br>
    <center><h1 style="background:rgba(225, 179, 179, 0.5);width:500px;height:40">SAN MATEO SHS 342563</h1></center>
    <table align="center" cellpadding="10" class="shh">
    <!----First Name----->
        <tr>
```

```html
        <td><b>User Name</b></td>
        <td><input type="text" style="border:5px" na
me="First_Name" maxlength="30"/>
        (max 30 characters a-z and A-Z)</td>
    </tr>
  <!----First Name----->
    <tr>
        <td><b>Password</b></td>
        <td><input type="password" style="border:5px
" name="First_Name" maxlength="30"/>
        (max 30 characters a-z and A-Z)</td>
    </tr>
 <tr>
 <td></td>
 <td>
 <a href="regform.html"><font color="black"><b>Sign I
n</b></font></a>
 <p align="right">Prepared By: Charles Babbage</p>
 </td>
 </form>
 </body>
 </html>
```

```html
<html>
    <head>
        <title>SMSHS Registration Form</title>
    </head>
    <style>
    body {
      margin: 0;
      font-family: Arial, Helvetica, sans-serif;
    }

    .topnav {
      overflow: hidden;
      background-color: #330;


    }

    .topnav a {
      float: right;
      color: #f2f2f2;
      text-align: center;
      padding: 14px 16px;
      text-decoration: none;
      font-size: 17px;


    }

    .topnav a:hover {
      background-color: #ddd;
      color: rgba(225, 179, 179, 0.5);
```

```css
}
.topnav a.active {
  background-color: #ff66cc;
  color: white;
}
</style>
<style>
.tae {
    position:relative;
    background: rgba(225, 179, 179, 0.5)
}
.po{
    align:center;
}
* {box-sizing: border-box;}
body {font-family: Verdana, sans-serif;}
.mySlides {display: none;}
img {vertical-align: middle;}

/* Slideshow container */
.slideshow-container {
  max-width: 3000px;
  position: relative;
  margin: auto;
}
/* Caption text */
.text {
  color: #f2f2f2;
  font-size: 15px;
  padding: 8px 12px;
  position: absolute;
  bottom: 8px;
```

```css
  width: 100%;
  text-align: center;
}
/* Number text (1/3 etc) */
.numbertext {
  color: #f2f2f2;
  font-size: 12px;
  padding: 8px 12px;
  position: absolute;
  top: 0;
}
/* The dots/bullets/indicators */
.dot {
  height: 15px;
  width: 15px;
  margin: 0 2px;
  background-color: #bbb;
  border-radius: 50%;
  display: inline-block;
  transition: background-color 0.6s ease;
}
.active {
  background-color: #717171;
}
/* Fading animation */
.fade {
  -webkit-animation-name: fade;
  -webkit-animation-duration: 1.5s;
  animation-name: fade;
  animation-duration: 1.5s;
}
@-webkit-keyframes fade {
```

```css
    from {opacity: .4}
    to {opacity: 1}
  }
  @keyframes fade {
    from {opacity: .4}
    to {opacity: 1}
  }
  /* On smaller screens, decrease text size */
  @media only screen and (max-width: 300px) {
    .text {font-size: 11px}
  }
  .up{
      top:20%;
      postion:absolute;
      background: rgba(225, 179, 179, 0.5)
      }
  #demo{
      color:red;
  }


  </style>
```

```html
  <body bgcolor="ffe6f7">
  <div class="topnav">
    <a class="active" href="#home" onclick="myFunction
1()">SUBMIT</a>
    <a href="regform.html">RESET</a>
    <a href="login.html">SIGN IN</a>
  </div>
  <center><h1 align ="left">STUDENT REGISTRATION FORM<
/h1></center>
```

```html
<div class="up" >

<form align="center" style="position:absolute;top:10
%">
<table border="0" align="center" cellpadding="8" cla
ss="up"  style="background:rgba(225, 179, 179, 0.5);widt
h:700px;height:40">
<br>
<br>
<br>
<!----Student Number---->
<tr>
    <td>Student Number</td>
    <td><input type="text" style="border:5px" maxlen
gth="12"/>
    (max 12 characters a-z and A-Z)
    </td>
</tr>
<!----First Name---->
<tr>
    <td >First Name</td>
    <td><input type="text" style="border:5px" maxlen
gth="30" id="p1"/>
    (max 30 characters a-z and A-Z)
    </td>
</tr>
<!----Last Name---->
<tr>
    <td>Last Name</td>
    <td><input type="text" style="border:5px" maxlen
gth="30" id="p2"/>
```

```html
        (max 30 characters a-z and A-Z)
    </td>
</tr>
<!----Date of Birth---->
<tr>
    <td>Date of Birth</td>
<td><select name="Month">
        <option value="Month">Month</option>
        <option value="January">January</option>
        <option value="February">February</option>
        <option value="March">March</option>
       <option value="April">April</option>
        <option value="May">May</option>
        <option value="June">June</option>
        <option value="July">July</option>
      <option value="August">August</option>
        <option value="September">September</option>
       <option value="October">October</option>
        <option value="November">November</option>
        <option value="December">December</option>
</select>
<select name="Day">
      <option value="Day">Day</option>
        <option value="1">1</option>
        <option value="2">2</option>
        <option value="3">3</option>
       <option value="4">4</option>
        <option value="5">5</option>
        <option value="6">6</option>
       <option value="7">7</option>
        <option value="8">8</option>
        <option value="9">9</option>
```

```html
        <option value="10">10</option>
        <option value="11">11</option>
        <option value="12">12</option>
        <option value="13">13</option>
        <option value="14">14</option>
        <option value="15">15</option>
        <option value="16">16</option>
        <option value="17">17</option>
        <option value="18">18</option>
        <option value="19">19</option>
        <option value="20">20</option>
        <option value="21">21</option>
        <option value="22">22</option>
        <option value="23">23</option>
        <option value="24">24</option>
        <option value="25">25</option>
        <option value="26">26</option>
        <option value="27">27</option>
        <option value="28">28</option>
        <option value="29">29</option>
        <option value="30">30</option>
    <option value="31">31</option>
</select>
<select name="Year">
    <option value="Year">Year</option>
        <option value="2019">2019</option>
        <option value="2018">2018</option>
        <option value="2017">2017</option>
      <option value="2016">2016</option>
       <option value="2015">2015</option>
       <option value="2014">2014</option>
      <option value="2013">2013</option>
```

```html
            <option value="2012">2012</option>
            <option value="2011">2011</option>
          <option value="2000">2000</option>
           <option value="1999">1999</option>
           <option value="1998">1998</option>
          <option value="1997">1997</option>
           <option value="1996">1996</option>
           <option value="1995">1995</option>
          <option value="1994">1994</option>
           <option value="1993">1993</option>
           <option value="1992">1992</option>
          <option value="1991">1991</option>
           <option value="1990">1990</option>
           <option value="1989">1989</option>
          <option value="1988">1988</option>
           <option value="1987">1987</option>
           <option value="1986">1986</option>
          <option value="1985">1985</option>
           <option value="1984">1984</option>
           <option value="1983">1983</option>
          <option value="1982">1982</option>
           <option value="1981">1981</option>
           <option value="1980">1980</option>
           </td>
      </tr>
      <!----Email Address--->
      <tr>
          <td>Email Address</td>
          <td><input type="text" style="border:5px" maxlen
gth="30"/>
          (max 30 characters a-z and A-Z)
          </td>
```

```html
        </tr>
    <!----Mobile Number--->
    <tr>
        <td>Mobile Number</td>
        <td><input type="text" style="border:5px" maxlen
gth="30"/>
        (10 digit number)
        </td>
    </tr>
    </tr>
    <!----Gender--->
    <tr>
        <td>Gender</td>
        <td><input type="radio" style="border:5px" name=
"radio">Male <input type="radio" name="radio">Female
        </td>
    </tr>
    <!----Address--->
    <tr>
        <td>Address</td>
        <td><textarea rows="5" style="border:5px" cols="
"100" name="Address"></textarea>
        </td>
    </tr>
    <!----City--->
    <tr>
        <td>City</td>
        <td><input type="text" style="border:5px" maxlen
gth="30"/>
        (max 30 characters a-z and A-Z)
        </td>
    </tr>
```

```html
<!----Zip Code--->
<tr>
    <td>Zip Code</td>
    <td><input type="text" style="border:5px" maxlength="10"/>
    (10 digit number)
    </td>
</tr>
<!----Country---->
<tr>
    <td>Country</td>
<td><select name="Philippines">
    <option value="Philippines">Philippines</option>
    </td>
</tr>
<!----Hobbie--->
<tr>
    <td>Hobbie</td>
    <td><input type="radio" name="radio">Drawing <input type="radio" name="radio">Singing <input type="radio" name="radio">Dancing<br>
    <input type="radio" name="radio">Others <input type="text" style="border:5px" maxlength="30"/>
    </td>
</tr>
<!----Education--->
</table>

    <table border="0" class="tae" cellpadding="8" style="background:rgba(225, 179, 179, 0.5);width:700px;height:40">
```

```
<tr><br>
    <td>Education</td>

    <th>Level</th>
    <Td><b>School</b></td>

    <th>Year Graduated</th>
    <th>Course</th>
    </tr>
    <tr>


    <td></td>
    <th>1</th>
    <th>Elementary</th>
    <td><input type="text" style="border:5px"></td>
    <td><input type="text" style="border:5px"></td>
    </tr>
    <tr>


    <td></td>
    <th>2</th>
    <th>Secondary</th>
    <td><input type="text" style="border:5px"></td>
    <td><input type="text" style="border:5px"></td>
    </tr>
    <tr>


    <td></td>
    <th>3</th>
```

```html
      <th>College</th>
      <td><input type="text" style="border:5px"></td>
      <td><input type="text" style="border:5px"></td>
      </tr>
      <tr>


      <td></td>
      <th>4</th>
      <th>Master</th>
      <td><input type="text" style="border:5px"></td>
      <td><input type="text" style="border:5px"></td>
      </tr>

      <tr>
      <td>Courses</td>
      <th>BSIT<input type="radio"></th>
      <th>BSCS<input type="radio"></th>
      <th>BSCOE<input type="radio"></th>
      <th>BSED<input type="radio"></th>
      </tr>
      </table>
      </div>
</form>
</div>
</body>


<script>

function myFunction() {
  var txt,txt1;
```

```javascript
      if (confirm("You want to reset?")) {
        txt = "Sign-up again!!";
      } else {
        txt1 = "You pressed Cancel!";
      }
      document.getElementById("demo").innerHTML = txt;
      document.getElementById("demo").innerHTML = txt1;
    }
    </script>
    <script>
    function myFunction1() {
      var txt;
      var person = prompt("your name:", document.getElem
entById("p1").value);


      if (person == null || person == "") {
        txt = "User cancelled the prompt.";
      } else {
        txt = "Hello " + person + "! How are you today?"
;
      }
      document.getElementById("p1").value;



      var txt1;
      var person1 = prompt("your lastname:", document.ge
tElementById("p2").value);


      if (person1 == null || person1 == "") {
```

```
            txt1 = "User cancelled the prompt.";
        } else {
            txt1 = "Hello " + person1 + "! How are you today
?";
        }
        document.getElementById("p1").value;
    }
    </script>

    </html>
```