<html>

<head>

<title>FORM</title>

</head>

<body bgcolor="lightgreen">

<center>

<form method="post" textalign="center">

<table colspan="2" rowspan="6" >

<tr>

<td>Name :</td>

<td><input type="text" name="name"></td>

</tr>

<tr>

<td>Password :</td>

<td><input type="password" name="pass"></td>

</tr>

<tr>

<td>Gender :</td>

<td><input type="radio" sex="male" name="male">Male &nbsp&nbsp&nbsp <input type="radio" sex="female" name="female">Female</td>

</tr>

<tr>

<td>Email :</td>

<td><input type="text" name="mail"></td>

</tr>

<tr>

<td>Phone :</td>

<td><select>

<option value="977">977</option>

<option value="988">988</option>

<option value="999">999</option>

</select>

<input type="text" name="num"></td>

</tr>

<tr>

<td colspan="2"><button type="button">Submit</button></td>

</tr>

</table>

</form>

</center>

</body>

</html>