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Name – Shrijan Shrivastava (20BCL0059)
HTML/CSS form
<!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> Assignment Forms</title>
  <!-- <li>k rel="stylesheet" href="/Assignment1-Forms.css"> -->
  <link rel="preconnect" href="https://fonts.googleapis.com">
  <link rel="preconnect" href="https://fonts.gstatic.com" crossorigin>
  <link href="https://fonts.googleapis.com/css2?family=Poppins:wght@300&display=swap"</pre>
rel="stylesheet">
  <style>
    * {
      padding: 0;
      margin: 0;
      font-family: 'Poppins', sans-serif;
    }
    .container {
      display: flex;
      flex-direction: column;
      align-items: center;
      justify-content: center;
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}
.head-container {
  display: flex;
  align-items: center;
  justify-content: center;
  flex-direction: column;
  padding: 1.25rem;
  text-align: center;
}
.form-box {
  padding: 20px 16px;
  border-radius: 12px;
  border: 1px solid;
  box-shadow: rgba(60, 64, 67, 0.3) 0px 1px 2px 0px, rgba(60, 64, 67, 0.15) 0px 2px 6px 2px;
}
.name-box {
  display: flex;
  justify-content: space-evenly;
}
.name-box p {
  display: flex;
  flex-direction: column;
  padding: 4px;
}
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.input-fields {
  display: flex;
  flex-direction: column;
  padding: 2px;
  align-items: center;
}
.fields-container {
  display: flex;
  flex-direction: column;
  flex-wrap: nowrap;
  padding: 4px;
}
input,
select {
  font-size: 16px;
  padding: 0.25rem;
  border-radius: 6px;
}
.checkbox-container {
  flex-direction: row;
}
.checkbox-container label {
  margin-left: 4px;
}
```

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.btn-holder {
  padding: 4px;
  margin: 16px 0 0;
  display: flex;
  justify-content: flex-end;
  flex-direction: row;
}
button {
  cursor: pointer;
  padding: 0.25rem;
  background-color: blue;
  border-radius: 4px;
  font-size: 16px;
  outline: none;
  border: 0;
  width: 96px;
  margin-left: 4px;
  font-weight: 500;
  color: white;
}
#reset-btn {
  background-color: rgba(31, 31, 31, 0.621);
}
/* CSS */
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button:hover {
       background-color: #1366d6;
       box-shadow: rgba(0, 0, 0, .05) 0 5px 30px, rgba(0, 0, 0, .05) 0 1px 4px;
      opacity: 1;
      transform: translateY(0);
      transition-duration: .35s;
    }
    .button:hover:after {
      opacity: .5;
    }
    .button:active {
       box-shadow: rgba(0, 0, 0, .1) 0 3px 6px 0, rgba(0, 0, 0, .1) 0 0 10px 0, rgba(0, 0, 0, .1) 0 1px 4px -
1px;
      transform: translateY(2px);
      transition-duration: .35s;
    }
    .button:active:after {
      opacity: 1;
    }
    @media (min-width: 768px) {
       .button-65 {
         padding: 14px 22px;
         width: 176px;
      }
```

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}
  </style>
</head>
<body>
  <div class="container">
    <div class="head-container">
      <h3>
        Sign Up Form
      </h3>
      >
        Fill the below to proceed with the registration
      </div>
    <forms class="form-box">
      <div class="name-box">
        >
          <label for="first-name">First Name</label>
          <input type="text" id="first-name" required>
        >
          <label for="last-name">Last Name</label>
          <input type="text" id="last-name">
        </div>
      <div class="fields-container">
        <label for="Email">Email</label>
        <input type="text" id="Email" placeholder="something@example.com" required>
      </div>
```

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<div class="fields-container">
        <label for="gender">Gender</label>
        <select name="gender-select" id="gender">
          <option value="Male">Male</option>
          <option value="Female">Female</option>
        </select>
      </div>
      <div class="fields-container">
        <label for="phone">Phone</label>
        <input type="text" id="phone">
      </div>
      <div class="fields-container">
        <label for="password">Password</label>
        <input type="password" id="password">
      </div>
      <div class="fields-container">
        <label for="c-password">Confirm Password</label>
        <input type="text" id="c-password">
      </div>
      <div class="fields-container checkbox-container">
        <input type="checkbox" id="tnc">
        <label for="tnc">click the checkbox to agree to <a href="#">our Terms and Condition
</a></label>
      </div>
      <div class="btn-holder">
        <button type="reset" id="reset-btn">Reset</button>
        <button type="submit">Submit</button>
```

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</forms>
</div>
</body>
<footer style="display:flex;">
<a href="https://drive.google.com/drive/folders/16euOe-9R2a4Fjb885r5wgLe7u3H-X9gJ?usp=sharing" style="display: block; margin:auto">This form is a part of first assignment</a>
</footer>
</html>
```