<html>

<body>

<form>

<fieldset>

<legend> Book Donor Application</legend>

<label> Enter first name: </label> <br>

<input type="text" first name="first name"> <br>

<label>Enter Last name: </label><br>

<input type="text" Last name="last name"> <br>

<label> Enter your email</label><br>

<input type="email" name="email"><br>

<label> Enter your mobile no.</label><br>

<input type="number" name="number"><br>

<label. Enter your Address:</label><br>

<textarea></textarea><br>

<label> Enter your gender</label> <br>

<label> Enter Username></label><br>

<input type="text" name="text"><br>

<label> Enter your password</label><br>

<input type="password" name="pass"><br>

<label> Confirm your password</label><br>

<input type="password" name="pass"><br>

<body background="C:\Users\Student\Pictures\book.jpeg"

<input type="submit" value="register"

</fieldset>

</form>

</body>

</html>

