ACT #46 Answer Sheet

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<!DOCTYPE html>
<html lang="en">
  <head>
    <meta charset="UTF-8" />
    <meta name="viewport" content="width=device-width, initial-scale=1.0" />
    link
      rel="stylesheet"
      href="https://cdn.jsdelivr.net/npm/bootstrap@5.2.0/dist/css/bootstrap.min.css"
    />
    <script src="https://ajax.googleapis.com/ajax/libs/jquery/3.6.0/jquery.min.js"></script>
    <script src="https://cdn.jsdelivr.net/npm/bootstrap@5.0.2/dist/js/bootstrap.bundle.min.js">
</script>
    <script>
      $(document).ready(function () {
        $("#log_form").submit(function (x) {
          let first_name = $("#first_name").val();
          let last_name = $("#last_name").val();
          let email_add = $("#email_add").val();
          let mobile_num = $("#mobile_num").val();
          let pw = $("#pw").val();
          let con_pw = $("#con_pw").val();
          let valid_form_data = true;
          if (pw != con_pw) {
            alert("ERROR: Password and confirm password do not match!");
            valid_form_data = false;
          }
          if (!mobile_num.startsWith("09")) {
            alert("ERROR: Mobile number must start with 09!");
            valid_form_data = false;
          }
          if (valid_form_data) {
            $("#log_summary").prop("hidden", false); //make the Log Summary section visible
            $(".log-input").prop("disabled", true); //disable all Log Here! section input blanks
            $("#first_name_l").text(first_name);
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$("#last_name_l").text(last_name);
         $("#email_add_l").text(email_add);
         $("#mobile_num_l").text(mobile_num);
         alert("Log successful!");
       } else {
         alert("ERROR: Issue with form data!");
       }
       x.preventDefault();
     });
   });
 </script>
 <title>Logbook</title>
</head>
<body>
 <div class="container-fluid">
   <div class="row">
     <div class="col-lg-6">
       <h1>Log Here!</h1>
       <form id="log_form">
         <label>First name:</label>
         <input type="text" id="first_name" class="form-control log-input" />
         <label>Last name:</label>
         <input type="text" id="last_name" class="form-control log-input" />
         <label>Email address:</label>
          <input type="email" id="email_add" class="form-control log-input" />
          <label>Mobile number:</label>
         <input type="text" id="mobile_num" class="form-control log-input" />
         <label>Password:</label>
         <input type="password" id="pw" class="form-control log-input" />
         <label>Confirm password:</label>
         <input type="password" id="con_pw" class="form-control log-input" />
         <input type="submit" class="mt-4 btn btn-primary" />
       </form>
     </div>
     <div id="log_summary" class="col-lg-6" hidden>
        <h1>Log Summary</h1>
       <l
          <
           <strong>First name: </strong><span id="first_name_l"></span>
```