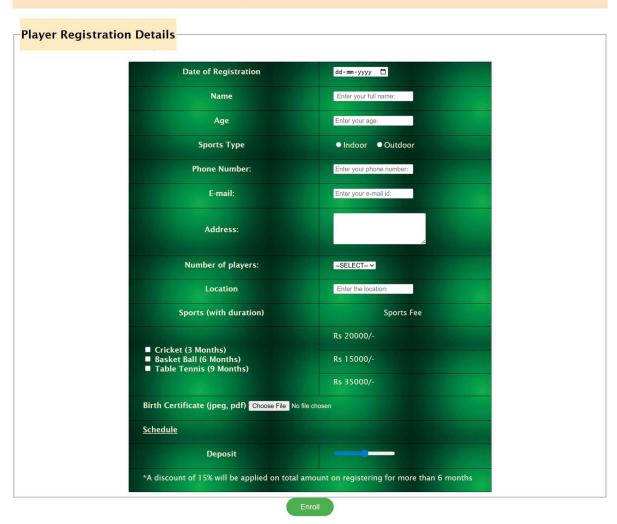
Assignment 2

Submitted by: Vijit Shetty

Snapshots:

Jasper Sports Academy



Assignment2.html

Code:

<!DOCTYPE html>

<html lang="en">

<head>

<meta charset="UTF-8">

<meta name="viewport" content="width=device-width, initial-scale=1.0">

<title>Assignment 2</title>

```
</head>
<style>
 table, th, td {
 border: 1px solid black;
border-collapse: collapse;
}
th, td {
 padding-top: 10px;
 padding-bottom: 20px;
 padding-left: 30px;
 padding-right: 40px;
}
th,td,a{
 color: antiquewhite;
}
#regtable{
background-image: url(abstract-gradient-background-with-green-color-spotlight-
pattern-illustration-free-vector.jpg);
}
body{
 font-family: 'Lucida Sans', 'Lucida Sans Regular', 'Lucida Grande', 'Lucida Sans
Unicode', Geneva, Verdana, sans-serif;
}
button{
  padding: 10px 30px;
 margin-left: 50%;
transform: translateX(-50%);
font-size: 16px;
```

```
border-radius: 50px;
background-color: #4CAF50;
color: white;
border: none;
cursor: pointer;
transition: background-color 0.3s ease, transform 0.2s;
}
</style>
<body>
 <h1 id="head_1" style="text-align: center; padding: 20px; background-color: bisque
;">Jasper Sports Academy</h1>
 <form id="form1">
 <fieldset>
 <legend style="background-image:url(pencil-cartoon-illustration-
vector.jpg);"><h2>Player Registration Details </h2></legend>
 <center>
 Date of Registration
   <input type="date" value="dor" id="DOR">
   Name
   <input type= "text" placeholder=" Enter your full name: "id="Name" required
pattern="[A-Za-z]+">
   Age
   <input type= "number" placeholder="Enter your age: id="Age" min="3"
required >
   <label for="Stype">Sports Type</label>
   <input type="radio" id="Stype" name="indoor" value="Indoor">Indoor &nbsp;
<input type="radio" id="Stype1" name="indoor" value="Outdoor">Outdoor
   Phone Number:
```

```
<input type="tel" id="tel1" name="Telephone" placeholder="Enter your phone
number:" pattern="[6-9]{1}[0-9]{9}">
  E-mail:
  <input type="email" id="mail" name="Mail" placeholder="Enter your e-mail id:"
required>
  Address:
  <textarea id="address" name="Address" rows="4" cols="24"
required></textarea>
  Number of players:<select name=nop id="NOP">--SELECT--
  <option disabled selected value>--SELECT--</option>
  <option value="addition">Single</option>
  <option value="subtraction">Double</option>
  Location
  <input type= "text" placeholder=" Enter the location: "id="Location"
required>
  Sports (with duration)<td style="text-align:
center;">Sports Fee
  <input type="checkbox" id="cricket1"
name="sports" value="Cricket (3 Months)"><label for="cricket1"> Cricket (3
Months)</label><br/>input type="checkbox" name="sports" id="basket1"
value="Basket Ball (6 Months)"><label for="basket1"> Basket Ball (6
Months)</label><br/>sinput type="checkbox" name="sports" id="table1" value="Table
Tennis (9 Months)"><label for="table1"> Table Tennis (9 Months)</label><br>
  Rs 20000/-
  Rs 15000/-
  Rs 35000/-
  <label for="myfile">Birth Certificate
(jpeg, pdf)</label>
<input type="file" id="myfile" name="myfile"><br> &nbsp;
<a href="timings.html"
target="_self">Schedule</a>
```

```
Deposit
<input type="range" id="deposit" min="1000" max="20000" required>
<span title=" Only on registration for more than 6
months">*A discount of 15% will be applied
on total amount on registering for
more than 6 months</span>
   </fieldset></center>
   <button type="submit" style="padd; margin-left: 50%; size: 70px;">Enroll</button>
</fieldset>
</form>
</body>
</html>
Timings.html
Code:
<!DOCTYPE html>
<html lang="en">
<head>
 <meta charset="UTF-8">
 <meta name="viewport" content="width=device-width, initial-scale=1.0">
 <title>Timings</title>
</head>
<style>
 table, th, td {
border: 1px solid black;
border-collapse: collapse;
}
```

```
th, td {
padding-top: 10px;
padding-bottom: 20px;
padding-left: 30px;
padding-right: 40px;
}
</style>
<body>
<h1>Sports Schedule</h1>
DateTimeSportEvent
 June 1, 202509:00 AMCricketMatch 1
 June 2, 202502:30 PMTable
TennisTournament
 June 3, 202506:00 PMBasket BallGame
1
 June 4, 202511:00 AMCricketMatch 2
</body>
</html>
```

