

1.	<pre> &lt;!DOCTYPE html&gt; &lt;html&gt; &lt;head&gt;   &lt;title&gt;Registration Form&lt;/title&gt; &lt;/head&gt; &lt;body&gt;   &lt;h1&gt;Registration Form&lt;/h1&gt;   &lt;form&gt;     &lt;label for="name"&gt;First Name:&lt;/label&gt;     &lt;input type="text" id="fname" name="name" required&gt;&lt;br&gt;&lt;br&gt;      &lt;label for="email"&gt;Last Name:&lt;/label&gt;     &lt;input type="text" id="lname" name="last name" required&gt;&lt;br&gt;&lt;br&gt;      &lt;label for="mnumber"&gt;Mobile Number:&lt;/label&gt;     &lt;input type="number" id="mnumber" name="mnumber" required&gt;&lt;br&gt;&lt;br&gt;      &lt;label for="email"&gt;Email:&lt;/label&gt;     &lt;input type="email" id="email" name="email" required&gt;&lt;br&gt;&lt;br&gt;      &lt;label for="gender"&gt;Gender:&lt;/label&gt;     &lt;input type="radio" id="male" name="gender" value="male" required&gt;     &lt;label for="male"&gt;Male&lt;/label&gt;     &lt;input type="radio" id="female" name="gender" value="female" required&gt;     &lt;label for="female"&gt;Female&lt;/label&gt;      &lt;label for="email"&gt;Email:&lt;/label&gt;     &lt;input type="email" id="email" name="email" required&gt;&lt;br&gt;&lt;br&gt;      &lt;label&gt;Favourite Music:&lt;/label&gt;     &lt;input type="radio" id="pop" name="music" value="pop" required&gt;     &lt;label for="pop"&gt;Pop&lt;/label&gt;     &lt;input type="radio" id="rock" name="music" value="rock" required&gt;     &lt;label for="rock"&gt;Rock&lt;/label&gt;     &lt;input type="radio" id="otherMusic" name="music" value="other" required&gt;     &lt;label for="otherMusic"&gt;Other&lt;/label&gt;&lt;br&gt;&lt;br&gt;      &lt;label for="additionalDetails"&gt;Additional Details:&lt;/label&gt;     &lt;textarea id="additionalDetails" name="additionalDetails" rows="4" cols="50"&gt;&lt;/textarea&gt;&lt;br&gt;&lt;br&gt; </pre>
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	<pre> &lt;label for="country"&gt;Country:&lt;/label&gt; &lt;select id="country" name="country" required&gt;   &lt;option value="USA"&gt;USA&lt;/option&gt;   &lt;option value="Canada"&gt;Canada&lt;/option&gt;   &lt;option value="UK"&gt;UK&lt;/option&gt;   &lt;!-- Add more options as needed --&gt; &lt;/select&gt;&lt;br&gt;&lt;br&gt;  &lt;input type="checkbox" id="agree" name="agree" required&gt; &lt;label for="agree"&gt;I agree to the terms and conditions&lt;/label&gt;&lt;br&gt;&lt;br&gt;  &lt;input type="submit" value="Submit"&gt;   &lt;input type="reset" value="Reset"&gt; &lt;/form&gt; &lt;/body&gt; &lt;/html&gt; </pre>
2.	<pre> &lt;!DOCTYPE html&gt; &lt;html&gt; &lt;head&gt;   &lt;title&gt;Car Registration&lt;/title&gt; &lt;/head&gt; &lt;body&gt;   &lt;h1&gt;Registration Form&lt;/h1&gt;   &lt;form&gt;     &lt;label for="oname"&gt;Owner Name:&lt;/label&gt;     &lt;input type="text" id="oname" name="oname" required&gt;&lt;br&gt;&lt;br&gt;      &lt;label for="email"&gt;Email Address:&lt;/label&gt;     &lt;input type="email" id="email" name="email" required&gt;&lt;br&gt;&lt;br&gt;      &lt;label for="number"&gt;Phone Number:&lt;/label&gt;     &lt;input type="number" id="phonenumber" name="number" required&gt;&lt;br&gt;&lt;br&gt;      &lt;label for="country"&gt;Country:&lt;/label&gt;     &lt;select id="country" name="country" required&gt;       &lt;option value="USA"&gt;USA&lt;/option&gt;       &lt;option value="Canada"&gt;Canada&lt;/option&gt;       &lt;option value="UK"&gt;UK&lt;/option&gt;       &lt;!-- Add more options as needed --&gt;     &lt;/select&gt;&lt;br&gt;&lt;br&gt;      &lt;label for="cmodel"&gt;Car Model:&lt;/label&gt;     &lt;input type="number" id="number" name="car model" required&gt;&lt;br&gt;&lt;br&gt; </pre>

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<label for="country">Manufacture Year:</label>
<select id="country" name="country" required>
  <option value="Select Year">Select Year</option>
  <option value="2001">2001</option>
  <option value="2002">2002</option>
  <!-- Add more options as needed -->
</select><br><br>

<label>Transmission:</label>
<input type="radio" id="manual" name="manual" value="manual"
required>
<label for="pop">Manual</label>
<input type="radio" id="auto" name="auto" value="auto" required>
<label for="rock">Auto</label><br><br>

<label for="additionalDetails">Additional Details:</label>
<textarea id="additionalDetails" name="additionalDetails" rows="4"
cols="50"></textarea><br><br>

<input type="checkbox" id="agree" name="agree" required>
<label for="agree">I agree to the terms and conditions</label><br><br>

<input type="submit" value="Submit">
<input type="reset" value="Reset">
</form>
</body>
</html>
```