Register to yourself

First Name :		
Please Enter Firts Name		
Last Name :		1
Please Enter Last Name		
DOB:		
Please Enter your date of birth		
Gender:		1
Select your Gender		
Email :		
Please Enter your Email		
MartialStatus:		1
Select your Martial Status		
PhoneNumber :		
Please Enter your Phone Number	9	
Education		1
Select Your Education		
Country:		
Select your Country		
City:		
Select your City	*	
Department		
Select your Department		
Sub Department	Demo Version - Se	loct Ddf SDK
Select to Your Sub Department	dellio version - de	lect.Ful SDK
Course		
Select your Course		
Teacher		
Select your Teacher		
Username:(Must be Unique)		
Please Enter Your Username		
Password:(Must be Unique)		
Please Enter Your Password		
Register Yo	urself	
		l
Cancel Pro	cess	