

HTML - Fonts

The font tag is having three attributes called size, color, and face to customize your fonts. To change any of the font attributes at any time within your webpage, simply use the tag. The text that follows will remain changed until you close with the tag. You can change one or all of the font attributes within one tag.

Set Font Size

You can set content font size using size attribute. The range of accepted values is from 1(smallest) to 7(largest). The default size of a font is 3.

```
<body>
  <font size = "1">Font size = "1"</font><br />
  <font size = "2">Font size = "2"</font><br />
  <font size = "3">Font size = "3"</font><br />
  <font size = "4">Font size = "4"</font><br />
  <font size = "5">Font size = "5"</font><br />
  <font size = "6">Font size = "6"</font><br />
  <font size = "7">Font size = "7"</font>
</body>
```

Setting Font Face

You can set font face using face attribute but be aware that if the user viewing the page doesn't have the font installed, they will not be able to see it. Instead user will see the default font face applicable to the user's computer.

```
<body>
  <font face = "Times New Roman" size = "5">Times New Roman</font><br />
  <font face = "Verdana" size = "5">Verdana</font><br />
  <font face = "Comic sans MS" size = "5">Comic Sans MS</font><br />
  <font face = "WildWest" size = "5">WildWest</font><br />
  <font face = "Bedrock" size = "5">Bedrock</font><br />
</body>
```


Setting Font Color

You can set any font color you like using color attribute. You can specify the color that you

want by either the color name or hexadecimal code for that color.

```
<body>
  <font color = "#FF00FF">This text is in pink</font><br />
  <font color = "red">This text is red</font>
</body>
```

Examples:

#FF0000 - With this HTML code we tell browser to show maximum of red and no green and no blue. The result is of course pure red color: 

#00FF00 - This HTML code shows just green and no red and blue. The result is: 

#0000FF - This HTML code shows just blue and no red and green. The result is: 

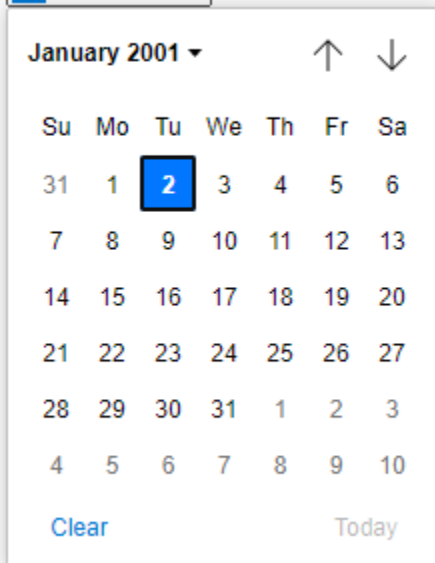
#FFFF00 - Combination of red and green color gives us yellow: 

#CCEEFF - Take some red a bit more of green and maximum of blue to get color of sky: 

Input Date

Start Date<input type="date" name="d1" value="2001-01-02" min="2000-12-01" max="2010-01-10">

Start Date



Input File

File<input type="file" name="f1">

File moh.docx

Example

Design a web page for COVID 19 vaccination with registration of the citizen and select the symptoms of the first vaccination as shown in below:

COVID 19 vaccination

<p>Registration First vaccination Second vaccination</p>	<p style="text-align: center;">Registration Information</p> <table border="1"> <tr> <td style="color: red;">Name</td> <td><input type="text"/></td> </tr> <tr> <td>ID number</td> <td><input type="text"/></td> </tr> <tr> <td>Gender</td> <td> <input type="radio"/> Male <input type="radio"/> Female </td> </tr> <tr> <td>Mobile number</td> <td><input type="text"/></td> </tr> <tr> <td colspan="2" style="text-align: center;"><input type="button" value="Register"/></td> </tr> </table>	Name	<input type="text"/>	ID number	<input type="text"/>	Gender	<input type="radio"/> Male <input type="radio"/> Female	Mobile number	<input type="text"/>	<input type="button" value="Register"/>	
Name	<input type="text"/>										
ID number	<input type="text"/>										
Gender	<input type="radio"/> Male <input type="radio"/> Female										
Mobile number	<input type="text"/>										
<input type="button" value="Register"/>											

Registration Information

Name	<input type="text"/>
ID number	<input type="text"/>
Gender	<input type="radio"/> Male <input type="radio"/> Female
Mobile number	<input type="text"/>
<input type="button" value="Register"/>	

First Vaccination

Code	<input type="text"/>
Date	mm/dd/yyyy <input type="text"/>
Type	Pfizer vaccine <input type="button" value="v"/>
Mobile number	<input type="text"/>
<input type="button" value="First vacc"/>	

Fisrt vaccination Symptoms

<input type="checkbox"/> حمى <input type="checkbox"/> رشح <input type="checkbox"/> صداع <input type="checkbox"/> ألم الجسم
--

Second Vaccination

Code	<input type="text"/>
Date	mm/dd/yyyy <input type="text"/>
Type	Pfizer vaccine <input type="button" value="v"/>
Mobile number	<input type="text"/>
<input type="button" value="Second vacc"/>	

Solution**registration.html**

```
<html> <head> <title> Citizen Registration</title>
</head><body>
<form action="page.php">
<table border="1">
<caption><font size="4" color="blue" face="arial"> Registration Information
</font></caption>
<tr>
<td><font size="4" color="red">Name</font></td>
<td><input type="text" name="t1"></td>
</tr><tr>
<td>ID number</td>
<td><input type="number" name="n1"></td>
</tr><tr>
<td>Gender</td>
<td><input type="Radio" name="r1" value="M">Male <br>
<input type="Radio" name="r1" value="F">Female</td>
</tr><tr>
<td>Mobile number</td>
<td><input type="number" name="n2"></td>
</tr><tr>
<td colspan="2" align="center"><input type="submit" value="Register"></td>
</tr></table></form></body></html>
```

first.html

```
<html> <head> <title> First Vaccination </title> </head> <body>
<form action="page.php">
<table border="1">
<caption><font size="4" color="blue" face="arial"> First Vaccination</font></caption>
<tr>
<td><font size="4" color="red">Code</font></td>
<td><input type="number" name="n2"></td>
</tr> <tr>
<td>Date</td>
<td><input type="date" name="d1"></td>
</tr> <tr>
<td>Type</td>
<td><select name="s1">
<option value="1">Pfizer vaccine</option>
<option value="2">astrazeneca vaccine</option>
<option value="3">sinopharm vaccine</option>
</select></td>
</tr> <tr>
<td>Mobile number</td>
<td><input type="number" name="n2"></td>
</tr> <tr>
<td colspan="2" align="center"><input type="submit" value="First vacc"></td>
</tr>
</table> </form> </body> </html>
```

second.html

```

<html> <head> <title> Second Vaccination </title></head><body>
<form action="page.php"><table border="1">
<caption><font size="4" color="red" face="arial"> Fisrt vaccination
Symptoms</font></caption>
<tr><td><input type="checkbox" name="c1" value="1">حمى
<input type="checkbox" name="c1" value="2">رشح
<input type="checkbox" name="c1" value="3">صداع
<input type="checkbox" name="c1" value="4">الم الجسم
</td></tr></table><br>

<table border="1">
<caption><font size="4" color="blue" face="arial"> Second Vaccination</font></caption>
<tr>
<td><font size="4" color="red">Code</font></td>
<td><input type="number" name="n2"></td>
</tr> <tr> <td>Date</td>
<td><input type="date" name="d1"></td>
</tr><tr> <td>Type</td>
<td><select name="s1">
<option value="1">Pfizer vaccine</option>
<option value="2">astrazeneca vaccine</option>
<option value="3">sinopharm vaccine</option>
</select></td></tr> <tr>
<td>Mobile number</td>
<td><input type="number" name="n2"></td>
</tr> <tr>
<td colspan="2" align="center"><input type="submit" value="Second vacc"></td>
</tr></table></form></body></html>

```

main.html

```
<html>
<head>
<title> Main Page</title>
<frameset rows="20%,*">
  <frame src="title.html">
  <frameset cols="25%,*">
    <frame src="links.html">
    <frame src="registration.html" name="f1">
  </frameset>
</frameset>
</head>
</html>
```

links.html

```
<html> <body>
<p align="center">
<a href="registration.html" target="f1"> Registration </a><br>
<a href="first.html" target="f1"> First vaccination </a><br>
<a href="second.html" target="f1"> Second vaccination </a><br>
</p></body></html>
```

title.html

```
<html> <body>
<p align="center"><font size="7" color=#ff00f0 >COVID 19 vaccination </font></p>
</body></html>
```