AHTV Aboriginal Medical Service Promo QUESTIONNAIRE

* Required

Requireu	
1. Email address *	
Create an AMS Promo Message f	or your clinic
Please provide the following details for your AMS clin a promo video to play on your AHTV screen.	ic to enable Aboriginal Health Television to create
The promo video will be geo-targeted to play ONLY a of clinical services, opening hours, specialist services like to promote.	
Maximum duration: 2 mins (played once every hour)	
Minimum duration: 1 minute (played every half hour)	
Once you have submitted the questionnaire we will combe used in the promo.	reate a script for you and request photography to
2. Address *	
	-
	-
3. Contact Number	-
4. Email Address *	-
5. AMS Name	-
6. Address of your AMS	-
	-

Opening hours
Clinical Hours
After Hours
House Call Doctor
List your health & medical services
Phone (include area code)
Fax
Email
Website
Social media addresses

