

CAIRNS HEALTH ONLINE SUBSCRIPTION

Welcome to Cairns Health Online. This resource, managed by FNQ Docs provides valuable information about health care providers and other health and welfare services available in the Cairns and Hinterland regions.

This subscription form is for use by Pharmacists and Community Organisations . General Practitioners & Specialists should complete a membership form and Allied Health Providers should complete an Associateship Membership form available from this web link:

<http://www.cairnshealthonline.com/contact>

PROVIDER DETAILS

Surname			
Given Name/s			
Occupation			
Discipline			
Interests or services provided			
Profession Type: (Please tick)	<input type="radio"/> Community Organisation <input type="radio"/> Other: _____		

ORGANISATION DETAILS

Organisation Name							
Address							
Suburb		State		Postcode			
Phone		Fax Number					
Providers working at this organisation							
Practice Email		Website					

Trading Hours	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

AGREEMENT

I would like to subscribe to Cairns Health Online website and will provide updated details where relevant.

Signature		Date	
------------------	--	-------------	--