

Subscription Member

VIDEO ON DEMAND FORM

Only submit this form to
streaming@supa-ecart.co.za



A

The Customer Contact will receive a link to upload all the Videos

Customer Name :

Customer Contact **Date Submitted :**

Date of your Broadcast :

Time of the Broadcast :

Subscription Purchased : ☐ **All In One** ☐ **Digital Agency** ☐ **Quick Start Channels**

E-Mail **Mobile Number**

B

DETAILED VIDEO INFORMATION

Video Format : ☐ MP4 ☐ Other ☐ Other

Playlist : ☐ Yes ☐ No

Thumbnail Submitted : ☐ Yes ☐ No ☐ **SUPA-eCart to Generate**

High Resolution Logo Submitted : ☐ Yes ☐ No

Other Comments

Name and Signature

Name of Video 1:

Call To Action Words : ☐ Yes ☐ No

Name of Video 2 :

Call To Action Words : ☐ Yes ☐ No

Name of Video 3 :

Call To Action Words : ☐ Yes ☐ No

Name of Video 4 :

Call To Action Words : ☐ Yes ☐ No

Name of Video 5:

Call To Action Words : ☐ Yes ☐ No

Name of Video 6:

Call To Action Words : ☐ Yes ☐ No

Name of Video 7:

Call To Action Words : ☐ Yes ☐ No

Name of Video :

Call To Action Words : ☐ Yes ☐ No

Name of Video :

Call To Action Words : ☐ Yes ☐ No

Name of Video :

Call To Action Words : ☐ Yes ☐ No

Name of Video :

Call To Action Words : ☐ Yes ☐ No

Name of Video :

Call To Action Words : ☐ Yes ☐ No

Name of Video :

Call To Action Words : ☐ Yes ☐ No