



Ava Padilla #20897

Last edited by Camille Romero on Jun 18 at 11:24 AM



Messages

Notes

< Back

Find account section



About

Timeline

Household Contacts

Employment History

Relationships 1

Addresses 1

Data Privacy & Consent

Donations

Event Registrations 24

Memberships

Peer-to-Peer Fundraising

Store Orders

Notes

Activities

Grants

Prospects

Solicited Gifts

Invitations

Letters & Materials

Sent Emails 59

Text Messages

Mailchimp

Constant Contact

Eventbrite

Soft Credits

Volunteer

Volunteer Waivers

Survey Responses 1

Workflows

Receipts

4/5
Generosity Indicator

4/5 Affinity 4/5 Recency 3/5 Frequency 5/5 Monetary Value

All Time Annual Fiscal

\$0.00 Donations 0.00 Volunteer Hours \$2,730.00 Event Registrations

20 Event Attendance \$0.00 Memberships \$0.00 Soft Credits

\$0.00 Store Purchases

All Time Generosity Total \$2,730.00

Configure Edit

NAME	
First	Ava
Middle	—
Last	Padilla
Preferred	Ava
Prefix	—
Suffix	—
Salutation	—

MEMBERSHIP	
Account Current	—
Membership Status	—
Membership Term	—
Membership Level	—
Membership Directory	—
Directory Opt-In Status	Automatically Opted In

ACCOUNT DETAILS	
Type	Athlete
Source	Online/Internet
Household	—
Employment	—
Gender	—
Birthday	Sep 11, 2005
Login	mmpadilla@gmail.com Last logged in: Oct 27 at 10:36 AM
Login Confirmed	—

CONTACT	
Phone	(505) 350-3473
	(505) 440-6199
	—
	—
	Fax
	—
	SMS/MMS Number

Email	mmpadilla@gmail.com	...
	—	
	—	

Address	
	Copy Map
	12413 New Dawn RD NE Albuquerque, NM 87122
	—
	County

GENERAL INFORMATION	
SNOW BALL ASSIGNED SOLICITOR	—
2022 SNOW BALL SPECIAL NOTES:	—
2020 SNOW BALL SPECIAL NOTES:	—
Logo Pathway:	—
Preferred Contact Method	—
Preferred Contact Reason	—

DATA PRIVACY & CONSENT	
SMS/MMS	Not Asked

ATHLETE	
Parent/Guardian Name(s) (If under 18)	Michelle & Mark Padilla
Are you registering with ASPNM as a	Athlete
Athlete contact person relationship to Athlete	Mark & Michelle Padilla

Texting ok at Phone 1?	Yes	Start year with ASPNM	2014
Emergency Contact Name	Michelle Padilla	Seasons with ASP	5
Emergency Contact Phone Number	(505)4406199	Annual Household Income	45,000-89,999
Interested in summer program	—	Ethnicity	Hispanic or Latino
Interested in winter program	Maybe	Race	White
Ski Area	Ski Santa Fe	Military Service	None
Staff Only: waiver due date	—	DD-214 #	—
		Are you considered a Wounded Warrior?	—

VOLUNTEER		Date of Injury	—
Volunteer Interests	—	Which Military Branch did you serve in (select all the apply)	—
How did you hear about ASPNM?	APS	Height	5'2
Why would you like to be a part of the ASPNM?	—	Weight	112
ASP offers a wide variety of ways to get involved, including sports instructors, committee participation, and more! For which ASP events would you be interested in volunteering?	—	Type of Disability	Autism
Have you ever taught Adaptive Sports of any kind?	—	Description of disability. Please include anything that you would like ASP to know that has not been addressed.	Autism- impaired communication, cognitive and gross motor skills.
Have you ever taught Skiing and/or Snow Boarding?	—	What type of skiing/riding do you think you will be doing	Stand Up Snowboarding
Taught Adaptive Ski/Snowboard prior to ASPNM?	—	What functions are affected?	Motor planning, cognition, sensory speech/language physical
PSIA or AASI certification (or other professional Snowsport certification)	—	Current activities	Swimming bike riding
Summer Sports certifications, skills, and years experience?	—	Medications	none
Summer Sports equipment owned?	—	Seizures	No
Other sport skills/experience?	—	If yes, date of last seizure	—
Non-sport Volunteer?	—	Food or medication allergies	Cow's milk, only drinks goat's milk
What skills do you have that you would consider contributing	—	Need to limit activities?	No
		Primary Care Physician name	Dr. Ibuki Suga- High Desert Pediatrics
		Primary Care Physician phone	(505)255-1866
		Health Insurance	Yes
		Ability to sense cold	Yes
		Comprehension	Impaired but able to understand