

Notice - Overdue Balance



OVERDUE ALERT: This message is to let you know that your account has an invoice or balance of 45 days or more past due. At 60 days overdue, your account will be suspended.

Please have your organization's billing contact reach out to us via email at billing@neonone.com for more information.

< Back



Dagoberto Saenz #14525

Last edited by Binh Wakeford on Dec 16 at 12:25 PM



Messages

Notes

Find account section



About

Timeline

Household Contacts

Employment History

Relationships

Addresses 1

Data Privacy & Consent 1

Donations 1

Event Registrations 1

Memberships

Peer-to-Peer Fundraising

Store Orders

Notes

Activities

Grants

Prospects

Solicited Gifts

Invitations

Letters & Materials

Sent Emails 28

Text Messages

Mailchimp

Constant Contact

Eventbrite

Soft Credits

Volunteer

Volunteer Waivers

Survey Responses

Workflows

Receipts

4.4/5
Generosity Indicator

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

\$38.46 Donations	0.00 Volunteer Hours	\$360.00 Event Registrations
1 Event Attendance	\$0.00 Memberships	\$0.00 Soft Credits
\$0.00 Store Purchases		

All Time Generosity Total \$398.46

Configure Edit

NAME	
First	Dagoberto
Middle	-
Last	Saenz
Preferred	Dagoberto
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	-
Household	-
Employment	-
Gender	Male
Birthday	Aug 16, 1997
Login	Dscdago Last logged in: Nov 10 at 9:34 PM
Login Confirmed	-

CONTACT	
Phone	(970) 308-1052
Home	-
Mobile	-
Fax	-
SMS/MMS Number	-
Email	daguito_saenz@hotmail.com

GENERAL INFORMATION	
SNOW BALL ASSIGNED SOLICITOR	-
2022 SNOW BALL SPECIAL NOTES:	-
2020 SNOW BALL SPECIAL NOTES:	-
Logo Pathway:	-

ADDRESS	
Address	237 San Pedro Dr. NE Albuquerque, NM 87108 United States of America
County	-
Online	-

DATA PRIVACY & CONSENT	
SMS/MMS	Declined

ATHLETE	

Preferred Contact Method	Unknown	Parent/Guardian Name(s) (If under 18)	—
Preferred Contact Reason	All Correspondence	Are you registering with ASPNM as a	—
Texting ok at Phone 1?	—	Athlete contact person relationship to Athlete	Parent
Emergency Contact Name	Patricia Cevallos	Start year with ASPNM	2016
Emergency Contact Phone Number	9705452581	Seasons with ASP	2025
Interested in summer program	—	Annual Household Income	30,000-44,999
Interested in winter program	Yes	Ethnicity	Hispanic or Latino
Ski Area	Ski Santa Fe	Race	White
Staff Only: waiver due date	—	Military Service	None
VOLUNTEER		DD-214 #	—
Volunteer Interests	—	Are you considered a Wounded Warrior?	No
How did you hear about ASPNM?	—	Date of Injury	—
Why would you like to be a part of the ASPNM?	—	Which Military Branch did you serve in (select all the apply)	—
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?	—	Height	5'2"
Have you ever taught Adaptive Sports of any kind?	—	Weight	140lb
Have you ever taught Skiing and/or Snow Boarding?	—	Type of Disability	Spinal cord injury
Taught Adaptive Ski/Snowboard prior to ASPNM?	—	Description of disability. Please include anything that you would like ASP to know that has not been addressed.	Bullet injury on T-10 - T-11.
PSIA or AASI certification (or other professional Snowsport certification)	—	What type of skiing/riding do you think you will be doing	—
Summer Sports certifications, skills, and years experience?	—	What functions are affected?	Paralyzed from waist down
Summer Sports equipment owned?	—	Current activities	Wheelchair basketball.
Other sport skills/experience?	—	Medications	None
		Seizures	No
		If yes, date of last seizure	—
		Food or medication allergies	None.
		Need to limit activities?	No.
		Primary Care Physician name	Yen-Phuong Huynh Bui
		Primary Care Physician phone	5052725885