Back

Find account section

- About
- Timeline
- Household Contacts
- Employment History
- Relationships
- Addresses 1
- Data Privacy & Consent 5
- Donations
- Event Registrations
- Memberships
- Peer-to-Peer Fundraising
- Store Orders
- Notes
- Activities
- Grants
- Prospects
- Solicited Gifts
- Invitations
- Letters & Materials
- Sent Emails
- Text Messages
- Mailchimp
- Constant Contact
- Eventbrite
- Soft Credits
- Volunteer
- Volunteer Waivers
- Survey Responses
- Workflows
- Receipts

Emerson Brooks #25993

Last edited by Binh Wakeford on Nov 22 at 11:38 AM

Messages Notes

3.2/5

Generosity Indicator

4/5	4/5	3/5	1/5
Affinity	Recency	Frequency	Monetary Value

All Time | Annual | Fiscal

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

All Time Generosity Total $0.00

Configure Edit

NAME

First	Emerson
Middle	–
Last	Brooks
Preferred	Emerson
Prefix	–
Suffix	–
Salutation	–

ACCOUNT DETAILS

Type	Athlete
Source	Online/Internet
Household	–
Employment	–
Gender	Male
Birthday	Aug 15, 2019
Login	TealH
Login Confirmed	–

GENERAL INFORMATION

SNOW BALL ASSIGNED SOLICITOR	–
2022 SNOW BALL SPECIAL NOTES:	–
2020 SNOW BALL SPECIAL NOTES:	–
Logo Pathway:	–
Preferred Contact Method	–
Preferred Contact Reason	–

MEMBERSHIP

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

CONTACT

Phone	(505) 234-4601
	–
	–
	– Fax
	– SMS/MMS Number
Email	teal.harbin@gmail.com
	–
	–
Address	Copy Map
	7512 Danielito Avenue NW Albuquerque, NM 87120-5126 United States of America
	Bernalillo County
Online	–

DATA PRIVACY & CONSENT

SMS/MMS	Not Asked

ATHLETE

Parent/Guardian Name(s) (If under 18)	Teal Harbin
Are you registering with ASPNM as a	Athlete

Texting ok at Phone 1?	—
Emergency Contact Name	Aaron Brooks
Emergency Contact Phone Number	505-227-9683
Interested in summer program	—
Interested in winter program	—
Ski Area	—
Staff Only: waiver due date	—

VOLUNTEER

Volunteer Interests	—
How did you hear about ASPNM?	—
Why would you like to be a part of the ASPNM?	—
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?	—
Have you ever taught Adaptive Sports of any kind?	—
Have you ever taught Skiing and/or Snow Boarding?	—
Taught Adaptive Ski/Snowboard prior to ASPNM?	—
PSIA or AASI certification (or other professional Snowsport certification)	—
Summer Sports certifications, skills, and years experience?	—
Summer Sports equipment owned?	—
Other sport skills/experience?	—
Non-sport Volunteer?	—
What skills do you have that you would consider contributing	—

Athlete contact person relationship to Athlete	Mother
Start year with ASPNM	2025
Seasons with ASP	—
Annual Household Income	—
Ethnicity	Hispanic or Latino
Race	White
Military Service	None
DD-214 #	—
Are you considered a Wounded Warrior?	—
Date of Injury	—
Which Military Branch did you serve in (select all the apply)	—
Height	43"
Weight	41 lbs
Type of Disability	Muscular Dystrophy Spinal cord injury
Description of disability. Please include anything that you would like ASP to know that has not been addressed.	22q11.2 deletion syndrome; metabolic, m and cognitive issues; gross motor delays, weakness, chronic fatigue and pain
What type of skiing/riding do you think you will be doing	—
What functions are affected?	metabolic, muscle and cognitive issues; g motor delays, weakness, chronic fatigue a
Current activities	—
Medications	—
Seizures	No
If yes, date of last seizure	—
Food or medication allergies	Diary allergy
Need to limit activities?	—
Primary Care Physician name	—
Primary Care Physician phone	—
Health Insurance	—
Ability to sense cold	Yes
Comprehension	Yes