



Ian Adair #20736

Last edited by Binh Wakeford on Dec 16, 2025 at 4:18 PM



Messages

Notes

< Back

Find account section



About

Timeline

Household Contacts

Employment History

Relationships

Addresses 1

Data Privacy & Consent

Donations 1

Event Registrations 24

Memberships

Peer-to-Peer Fundraising

Store Orders

Notes

Activities

Grants

Prospects

Solicited Gifts

Invitations

Letters & Materials

Sent Emails 30

Text Messages

Mailchimp

Constant Contact

Eventbrite

Soft Credits

Volunteer

Volunteer Waivers

Survey Responses

Workflows

Receipts

4/5  
Generosity Indicator

All Time Annual Fiscal

\$58.97 Donations  
0.00 Volunteer Hours  
\$6,470.00 Event Registrations

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

\$0.00 Store Purchases

All Time Generosity Total \$6,528.97

Configure Edit

NAME	
First	Ian
Middle	—
Last	Adair
Preferred	Ian
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	Male
Birthday	Apr 19, 1990
Login	dadair@dfn.com Last logged in: Jan 2 at 1:43 PM
Login Confirmed	—

CONTACT	
Phone	(505) 629-8879
Home	—
Work	—
Fax	—
SMS/MMS Number	—

Email dadair27@gmail.com

Address	
2800 Pintado Circle Santa Fe, NM 87507	
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)	—
Are you registering with ASPNM as a	—
Athlete contact person relationship to Athlete	Parent

Texting ok at Phone 1?	Yes	Start year with ASPNM	2016
Emergency Contact Name	Rod Adair	Seasons with ASP	—
Emergency Contact Phone Number	5756262876	Annual Household Income	90,000 or more
Interested in summer program	—	Ethnicity	Not Hispanic or Latino
Interested in winter program	—	Race	American Indian or Alaska Native White
Ski Area	—	Military Service	None
Staff Only: waiver due date	—	DD-214 #	—
<b>VOLUNTEER</b>		Are you considered a Wounded Warrior?	—
Volunteer Interests	—	Date of Injury	—
How did you hear about ASPNM?	Newspaper	Which Military Branch did you serve in (select all the apply)	—
Why would you like to be a part of the ASPNM?	—	Height	6'
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?	—	Weight	170
Have you ever taught Adaptive Sports of any kind?	—	Type of Disability	Autism
Have you ever taught Skiing and/or Snow Boarding?	—	Description of disability. Please include anything that you would like ASP to know that has not been addressed.	Impaired communication. Good receptive language, but poor expressive language. I recognize danger.
Taught Adaptive Ski/Snowboard prior to ASPNM?	—	What type of skiing/riding do you think you will be doing	Stand Up Skiing
PSIA or AASI certification (or other professional Snowsport certification)	—	What functions are affected?	Communication. Difficulty with changes in Needs clear, short directions and supervis
Summer Sports certifications, skills, and years experience?	—	Current activities	Light walking and swimming
Summer Sports equipment owned?	—	Medications	Sertraline 200 mg x1 Risperdone 2 mg x4 Gabapentin 300 mg x3 Clonidine .1 mg x1 Lorazepam 1-2 mg, prn
Other sport skills/experience?	—	Seizures	No
Non-sport Volunteer?	—	If yes, date of last seizure	—
What skills do you have that you would consider contributing	—	Food or medication allergies	None
		Need to limit activities?	No
		Primary Care Physician name	Bridget Andrew, IHS
		Primary Care Physician phone	505-946-9282
		Health Insurance	Yes
		Ability to sense cold	Normal