



Isabel Bustamante #23300

Last edited by Binh Wakeford on Dec 18 at 7:13 PM



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Monetary Value

\$29.43 Donations	0.00 Volunteer Hours	\$430.00 Event Registrations
2 Event Attendance	\$0.00 Memberships	\$0.00 Soft Credits
\$0.00 Store Purchases		

All Time Generosity Total \$459.43

Configure Edit

NAME	
First	Isabel
Middle	—
Last	Bustamante
Preferred	Jose
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	Female
Birthday	Jul 20, 2015
Login	j.boosta Last logged in: Oct 29 at 6:29 PM
Login Confirmed	—

CONTACT	
Phone	(505) 508-9489
Home	—
Work	—
Fax	—
SMS/MMS Number	—
Email	josebusta1@gmail.com
Address	8608 Mesa Top Rd NW Albuquerque, NM 87120
County	—
Online	—

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
Athlete contact person relationship to Athlete	Father

Texting ok at Phone 1?	—	Start year with ASPNM	2024
Emergency Contact Name	Jose Bustamante	Seasons with ASP	—
Emergency Contact Phone Number	505-508-9489	Annual Household Income	90,000 or more
Interested in summer program	—	Ethnicity	Hispanic or Latino
Interested in winter program	—	Race	Prefer not to say
Ski Area	—	Military Service	None
Staff Only: waiver due date	—	DD-214 #	—
VOLUNTEER		Are you considered a Wounded Warrior?	—
Volunteer Interests	—	Date of Injury	—
How did you hear about ASPNM?	—	Which Military Branch did you serve in (select all the apply)	—
Why would you like to be a part of the ASPNM?	—	Height	4ft
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	45
Have you ever taught Adaptive Sports of any kind?	—	Type of Disability	Hearing impairment - partial
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.	Genetic Disorder
Taught Adaptive Ski/Snowboard prior to ASPNM?	—	What type of skiing/riding do you think you will be doing	—
PSIA or AASI certification (or other professional Snowsport certification)	—	What functions are affected?	Non-abulatory. Laxity of joints. Non-verbal
Summer Sports certifications, skills, and years experience?	—	Current activities	Adaptive kayak. Bike trailer.
Summer Sports equipment owned?	—	Medications	None
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?	none
		Primary Care Physician name	Stephanie Nevarez Fernandez
		Primary Care Physician phone	505-873-7400
		Health Insurance	Yes
		Ability to sense cold	yes
		Comprehension	Some comprehension
		Hearing/Vision	no impediments
		Verbal communication	Understands some, but is unable to respo