

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.

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Josephine Dupont #24059

Last edited by on Oct 27 at 7:17 PM



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Generosity Indicator



All Time Annual Fiscal

\$236.46 Donations	0.00 Volunteer Hours	\$1,800.00 Event Registrations
13 Event Attendance	\$0.00 Memberships	\$0.00 Soft Credits
\$0.00 Store Purchases		

All Time Generosity Total \$2,036.46

Configure Edit

NAME

First	Josephine
Middle	—
Last	Dupont
Preferred	Josephine (Jojo)
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	Dupont Household Household Name
Employment	—
Gender	Female
Birthday	May 9, 2013
Login	Guillaumedupont Last logged in: Oct 27 at 7:17 PM
Login Confirmed	—

CONTACT

Phone	(505) 270-7375
Home	—
Mobile	—
Fax	—
SMS/MMS Number	—
Email	guillaumedupont@mac.com
Address	4010 Avenida La Resolana NE Albuquerque, NM 87110
County	—
Online	—

GENERAL INFORMATION

SNOW BALL ASSIGNED SOLICITOR	—
2022 SNOW BALL SPECIAL NOTES:	—
2020 SNOW BALL SPECIAL NOTES:	—

DATA PRIVACY & CONSENT

SMS/MMS Not Asked

ATHLETE

Logo Pathway:	—	Parent/Guardian Name(s) (If under 18)	Guillaume Dupont
Preferred Contact Method	—	Are you registering with ASPNM as a	Athlete
Preferred Contact Reason	—	Athlete contact person relationship to Athlete	Guillaume Dupont
Texting ok at Phone 1?	Yes	Start year with ASPNM	2019
Emergency Contact Name	Dominique	Seasons with ASP	—
Emergency Contact Phone Number	5052705967	Annual Household Income	30,000-44,999
Interested in summer program	Yes	Ethnicity	Not Hispanic or Latino
Interested in winter program	Yes	Race	White
Ski Area	Ski Santa Fe	Military Service	None
Staff Only: waiver due date	—	DD-214 #	None
VOLUNTEER		Are you considered a Wounded Warrior?	No
Volunteer Interests	—	Date of Injury	May 9, 2013
How did you hear about ASPNM?	Participated in ASAP 3 years ago at Ski Santa Fe	Which Military Branch did you serve in (select all that apply)	Not a Veteran
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	75lbs
Have you ever taught Adaptive Sports of any kind?	—	Type of Disability	Autism Cerebral Palsy Vision 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.	Cerebral palsy
Taught Adaptive Ski/Snowboard prior to ASPNM?	—	What type of skiing/riding do you think you will be doing	Sit Down Skiing - Bi-Ski
PSIA or AASI certification (or other professional Snowsport certification)	—	What functions are affected?	Low tone
Summer Sports certifications, skills, and years experience?	—	Current activities	PT, OT, walk with assistance
Summer Sports equipment owned?	—	Medications	None
		Seizures	No
		If yes, date of last seizure	—
		Food or medication allergies	Pecans walnuts.
		Need to limit activities?	No
		Primary Care Physician name	Dr Koil