



**Matthew Schroeder** #19406

Last edited by Camille Romero on Jun 24 at 3:51 PM



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**4.2/5**  
Generosity Indicator

4/5  
Affinity

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Recency

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Frequency

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Monetary Value

\$0.00 Donations	0.00 Volunteer Hours	\$200.00 Event Registrations
6 Event Attendance	\$1,800.00 Memberships	\$0.00 Soft Credits
\$0.00 Store Purchases		

**All Time Generosity Total \$2,000.00**

Configure Edit

NAME	
First	Matthew
Middle	—
Last	Schroeder
Preferred	Matthew
Prefix	—
Suffix	—
Salutation	—

MEMBERSHIP	
Account Current	Active
Membership Status	
Membership Term	ASPNM Membership (Renew)
Membership Level	ASPNM Athlete Membership
Membership Directory	—
Directory Opt-In Status	Automatically Opted In

ACCOUNT DETAILS	
Type	Athlete
Source	Online/Internet
Household	—
Employment	—
Gender	—
Birthday	Mar 1, 2013
Login	gjschroe@umich.edu Last logged in: Nov 12, 2024 at 9:53 PM
Login Confirmed	—

CONTACT	
Phone	(505) 690-0892
Home	—
Mobile	—
Fax	—
SMS/MMS Number	—

Email	gjschroe@umich.edu
	—
	—

Address	
	805 Aster Los Alamos, NM 87547 United States of America
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	—

Texting ok at Phone 1?	Yes	Athlete contact person relationship to Athlete	Parents
Emergency Contact Name	John Schroeder	Start year with ASPNM	2019
Emergency Contact Phone Number	5056900892	Seasons with ASP	—
Interested in summer program	—	Annual Household Income	90,000 or more
Interested in winter program	—	Ethnicity	Not Hispanic or Latino
Ski Area	—	Race	White
Staff Only: waiver due date	—	Military Service	None
VOLUNTEER		DD-214 #	—
Volunteer Interests	—	Are you considered a Wounded Warrior?	—
How did you hear about ASPNM?	Aspen School	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	3'7"
Have you ever taught Adaptive Sports of any kind?	—	Weight	43
Have you ever taught Skiing and/or Snow Boarding?	—	Type of Disability	Down Syndrome
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.	Matthew has down syndrome
PSIA or AASI certification (or other professional Snowsport certification)	—	What type of skiing/riding do you think you will be doing	Do not know
Summer Sports certifications, skills, and years experience?	—	What functions are affected?	Communication, behavioral, but does not to be limited physically
Summer Sports equipment owned?	—	Current activities	Running, jumping, riding, trampoline, park etc
Other sport skills/experience?	—	Medications	Levotyroxine, singulair, zyrtec
Non-sport Volunteer?	—	Seizures	No
What skills do you have that you would consider contributing	—	If yes, date of last seizure	—
		Food or medication allergies	None
		Need to limit activities?	no
		Primary Care Physician name	Neal
		Primary Care Physician phone	5056624234
		Health Insurance	Yes
		Ability to sense cold	Good
		Comprehension	Limited