



Oliver Whitton #25819

Last edited by Alex Grunstein on Nov 5 at 1:08 PM



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Monetary Value

All Time	Annual	Fiscal
\$0.00 Donations	0.00 Volunteer Hours	\$330.00 Event Registrations
1 Event Attendance	\$0.00 Memberships	\$0.00 Soft Credits
\$0.00 Store Purchases		
All Time Generosity Total \$330.00		

Configure Edit

NAME	
First	Oliver
Middle	—
Last	Whitton
Preferred	Oliver
Prefix	—
Suffix	—
Salutation	—

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

ACCOUNT DETAILS	
Type	—
Source	Online/Internet
Household	—
Employment	—
Gender	Male
Birthday	Feb 2, 2018
Login	cwhitton Last logged in: Nov 2 at 1:14 PM
Login Confirmed	—

CONTACT	
Phone	(505) 257-0483
Home	—
Work	—
Fax	—
SMS/MMS Number	(505) 257-0483
Email	christin.s.whitton@gmail.com
Address	319 Rover Blvd White Rock, NM 87547
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	Given

ATHLETE	
Parent/Guardian Name(s) (If under 18)	—
Are you registering with ASPNM as a	—

Texting ok at Phone 1?	—	Athlete contact person relationship to Athlete	—
Emergency Contact Name	John Whitton	Start year with ASPNM	2025
Emergency Contact Phone Number	5056951822	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?	a friend	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)	Not a Veteran
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	49in
Have you ever taught Adaptive Sports of any kind?	—	Weight	58.2lb
Have you ever taught Skiing and/or Snow Boarding?	—	Type of Disability	Cerebral Palsy
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.	Gross motor, fine motor and speech delay
PSIA or AASI certification (or other professional Snowsport certification)	—	What type of skiing/riding do you think you will be doing	Stand Up Skiing
Summer Sports certifications, skills, and years experience?	—	What functions are affected?	Balance and stability - Oliver can walk and tires quickly
Summer Sports equipment owned?	—	Current activities	soccer, running around and playing
Other sport skills/experience?	—	Medications	n/a
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	n/a
		Need to limit activities?	n/a
		Primary Care Physician name	—
		Primary Care Physician phone	—
		Health Insurance	—
		Ability to sense cold	not sure
		Comprehension	—