



Sherry Neher #24849

Last edited by Camille Romero on Jun 18 at 12:22 PM



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Monetary Value

All Time	Annual	Fiscal
\$0.00 Donations	0.00 Volunteer Hours	\$125.00 Event Registrations
5 Event Attendance	\$0.00 Memberships	\$0.00 Soft Credits
\$0.00 Store Purchases		
All Time Generosity Total \$125.00		

Configure Edit

NAME	
First	Sherry
Middle	—
Last	Neher
Preferred	Sherry
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	Aug 5, 1968
Login	humsw98 Last logged in: Nov 28 at 10:42 PM
Login Confirmed	—

CONTACT	
Phone	(909) 693-2063
Home	—
Work	—
Fax	—
SMS/MMS Number	—

Email humsw98@yahoo.com

Address	
26 Northland Meadows Dr Edgewood, NM 87015	
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	Declined

ATHLETE	
Parent/Guardian Name(s) (If under 18)	—
Are you registering with ASPNM as a	—
Athlete contact person relationship to Athlete	Sibling

Texting ok at Phone 1?	Yes	Start year with ASPNM	2024
Emergency Contact Name	Daryl Neher	Seasons with ASP	—
Emergency Contact Phone Number	575-650-5621	Annual Household Income	Prefer not to say
Interested in summer program	—	Ethnicity	Not Hispanic or Latino
Interested in winter program	—	Race	White
Ski Area	—	Military Service	Veteran
Staff Only: waiver due date	—	DD-214 #	4723
VOLUNTEER		Are you considered a Wounded Warrior?	No
Volunteer Interests	—	Date of Injury	—
How did you hear about ASPNM?	VA	Which Military Branch did you serve in (select all the apply)	Army
Why would you like to be a part of the ASPNM?	—	Height	5' 10
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	200
Have you ever taught Adaptive Sports of any kind?	—	Type of Disability	Hearing impairment - partial P.T.S.D. Traumatic brain injury
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.	Chronic osteoarthritis of knees, instability
Taught Adaptive Ski/Snowboard prior to ASPNM?	—	What type of skiing/riding do you think you will be doing	Do not know
PSIA or AASI certification (or other professional Snowsport certification)	—	What functions are affected?	Have not skied since military service.
Summer Sports certifications, skills, and years experience?	—	Current activities	Weights, swimming, recumbent road bike
Summer Sports equipment owned?	—	Medications	Tylenol/Motrine
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	Minocycline / Versed
		Need to limit activities?	No
		Primary Care Physician name	Womens Health Clinic NM VA
		Primary Care Physician phone	505-265-1711
		Health Insurance	No
		Ability to sense cold	Good
		Comprehension	Good
		Hearing/Vision	Good